

MERCURY AEROSPACE FASTENERS

P.O. Box 9759
11800 Sherman Way
No. Hollywood, CA 91609

(818) 982-4800
FAX (818) 764-9069
FAX (818) 765-1076

February 12, 1991

Mr. Chris Stubbs
U S Environmental Protection Agency
South Coast Groundwater Section H-6-4
P. O. Box 193036
San Francisco, CA 94119-3036

FEB 20 1991

PRG ENVIRONMENTAL
MANAGEMENT, INC.

SFUND RECORDS CTR
2166-02094

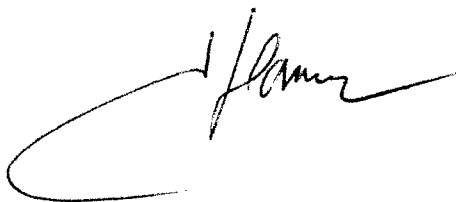
Dear Mr. Stubbs,

Please find here enclosed our response to your request for information regarding the facility located at 11800 Sherman Way, North Hollywood, California 91605.

We have attempted to answer all questions based on our actual knowledge or after a research was conducted pursuant to its request. We would like to clarify the fact that Mercury Aerospace, Inc. has not purchased the previous two companies of the operators of the facility, but only certain assets including the name of Mercury Aerospace Fasteners. Most of the documentation pertaining to either Mercury Aerospace Fasteners, Inc. or Microdot Aerospace Fastening Systems have been retained by these companies at the time of the sales transactions. We therefore suggest that the EPA contact the principals of these two companies for further assessments.

We remain available to answer any questions you may have regarding the enclosed questionnaire.

Sincerely,



Jerome A. Flament
Administrative Manager

Enclosures.

MERCURY AEROSPACE INC.

000003

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A F F I D A V I T

I, Jerome A. Flament do hereby certify to have completed a diligent record search and interviews of present employees who may have had knowledge of the requested information.

All information collected has been forwarded to EPA and is believed to answer all questions relating to information requested by EPA.



JEROME A. FLAMENT

2-12-91

DATE

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

1. List the EPA RCRA Identification Numbers of the Respondent, if any.

EPA ID Number = CAD981413131

2. Describe the nature and dates of current operations at the facility.

Mercury Aerospace, Inc. operates the facility since July of 1987. The principal nature of current operations is the manufacturing of aerospace fasteners in Alloy Steel, Stainless Steel, Titanium & nickel base alloys. Manufacturing process involves the heading (hot or cold) of these materials and machining operations related to the finishing of these products.

3. Identify the current owner(s) of the facility. State the dates during which the current owner owned, operated, or leased any portion of the facility, and provide copies of all documents evidencing or relating to such ownership, operation, or lease, including but not limited to, purchase and sale agreements, deeds, and leases.

The facility at 11800 Sherman Way is owned by Mr. Irvin Birken and Mr. Ralph Woodhouse. (refer to document A)
It is known that these persons operated this facility for a few years prior to our involvement. Also refer to our lease agreement, (document B.)

4. Provide a map of the facility. Describe the physical characteristics of the facility, including but not limited to, the following:

- a.) Surface structures (e.g., building, tanks, etc);
- b.) Subsurface structures (e.g., underground tanks, sumps, etc);
- c.) Ground water wells and dry wells, including drilling logs;
- d.) Past and present storm water drainage system, sanitary sewer system, including septic tank(s) and subsurface disposal field(s);
- e.) Any and all additions, demolitions, or changes of any kind to physical structures on, under, or about the facility, or to the property itself (e.g., excavation work) and state the dates on which such changes occurred.

Answer: a.) See referenced document A

b.) not known

c.) not known

d.) not known

e.) Construction of 2 containment areas performed on or about June 1988.

5. Identify all prior owners of the facility. For each prior owner further identify.
- a.) The date of ownership;
 - b.) All evidence that hazardous materials were released or threatened to be released at the facility during the period that they owned the facility.

Answer: a.) We believe ,from information collected by us that the present owners of the facility have owned the property since 1975. The property was thought to be owned previously by the Lankershim Ranch Land and Water Co. (refer to document A)

b.) Refer to document C

6. Identify the prior operators and lessees of the facility. For each such operator or lessee, further identify:
- a.) The dates of their operations at, or lease of, the facility;
 - b.) The nature of their operations at the facility;
 - c.) All evidence that hazardous materials were released or threatened to be released at the facility during the period in which they were operating at the facility.

Answer: a.) The facility was operated by Mercury Aerospace Fasteners, a division of Microdot Aerospace Fastening Systems from 1981 to July 1987.

b.) This company was involved in the same operations of manufacturing aerospace fasteners.

c.) The only evidence of possible contamination is contained in the attached document obtained thru the record of the County of Los Angeles Dept. of Health Services. (document C.)

7. Provide all existing technical or analytical information about the facility including but not limited to, data and documents related to soil, water (ground and surface), geology, hydrogeology, or air quality on and about the facility.

The facility is located in the eastern San Fernando Valley. The sub-surface of the Mercury Aerospace Fasteners site is typical of Quaternary alluvial flood plain deposits which predominantly consist of cobbles, gravels and sands with minor to moderate amounts of silts and clay. Depth to groundwater in wells No. 4929 and 4907-K located within one mile radius from the facility was 256.1 ft. in April 1989 and 249 ft. in June 1986 (LACDPW, 1990), respectively. Please refer to documents D & E for additional information.

8. Are you or your consultants planning to perform any investigations of the soil, water (ground or surface), geology, hydrogeology, or air quality on or about the facility? If so, identify:
- a.) The nature and scope of these investigations;
 - b.) The contractors or other persons that will undertake these investigations;

- c.) The purpose of the investigations;
- d.) The dates when such investigations will take place and be completed;
- e.) Where on the facility such investigations will take place.

- Answer:
- a.) Mercury Aerospace, Inc. has retained the services of
 - b.) Enviropro, Inc. to perform a Phase I Subsurface Investigation on 2/17/89 (see enclosed document E). Mercury Aerospace, Inc. has further retained the services of GeoSyntec Consultants, Inc. to conduct a Phase II Subsurface investigation.
 - c.) The purpose of the investigations was to comply with a request by the California Regional Water Quality Control Board, Los Angeles region to perform a site investigation in relation to their site investigation -well investigation program (AB1803 follow up prog.)
 - d.) The first Phase I investigation was performed on 2/17/89. The second Phase II investigation was performed on 11/24-11/25/90.
 - e.) Please refer to reports D & E for specific location of borings.

9. Did you acquire the facility after the disposal or placement of the hazardous substances on, in, or at the facility? Describe all of the facts on which you base the answer to this Questions.

Based on the document C obtained from the Department of Health Services we can assume that some hazardous substances were released on on or about the facility, previous to our occupation and operation of this facility.

10. At the time you acquired the facility, did you know or have reason to know that any hazardous substance was disposed of on, in, or at the facility? Describe all investigations of the facility that you took prior to acquiring the facility, and all of the facts on which you base the answer to this Question.

At the time of occupation by Mercury Aerospace Inc., we were unaware of any hazardous conditions that could have existed at the facility. Mercury Aerospace, Inc. did not conduct any investigation relating to hazardous condition prior to the assumption of the lease by this company.

11. Did you ever transport to the facility or use, purchase, generate, store, treat, dispose, or otherwise handle at the facility any materials, either hazardous or non-hazardous? If the answer to this question is anything but an unqualified "no", identify;
- a.) In general terms, the nature and quantity of the non hazardous materials so transported, used, purchased, generated, stored, treated, disposed, or otherwise handled;
 - b.) The common chemical name, specific chemical name, Chemical Abstract Service (CAS) number, chemical composition, characteristics, and physical state (e.g., solid, liquid, gas) of each

hazardous material so transported, used, purchased, generated, stored, treated, disposed, or otherwise handled;

- c.) The persons who supplied you with each hazardous material or how each hazardous material was generated by you;
- d.) How each such hazardous material was transported, used, purchased, stored, treated, disposed, or otherwise handled by you;
- e.) When each such hazardous material was used, purchased, generated, stored, treated, disposed, or otherwise handled by you;
- f.) Where each such hazardous material was used, purchased, generated, stored, treated, disposed, or otherwise handled by you, describing the location(s) and providing a map or diagram of such location(s). Location information should include, but is not limited to, information pertaining to tanks, ponds, treatment facilities, and other units which were historically used to generate, store, treat or dispose of hazardous materials, but which may no longer exist.
- g.) The persons who transported and/or disposed of each such hazardous material. If disposal off of the facility occurred, provide a detailed description, including copies of manifests, and identifying the location where the hazardous material was transported.
- h.) The annual quantity of each such hazardous material used, purchased, generated, stored, treated, transported, disposed, or otherwise handled by you, reported in gallons for liquids and pounds for solids.

Answer: a.) See document F here enclosed
b.) see document F here enclosed
c.) Refer to document F
d.) W.S. Doge Oil Company, Inc. 3710 Fruitland Ave., Maywood, CA 90270
e.) Refer to document F here enclosed.
f.) Refer to Map enclosed. (Document G)
Note: We have no background information on previous operator practices.
g.) Copies of manifests enclosed. (Document H)
h.) See waste returns enclosed. (Document I)

12. Identify all leaks, spills, or releases or threats or releases of any kind into the environment of any hazardous materials that have occurred or may occur at or from the facility. In addition, identify:

- a.) When such releases occurred or may occur;
- b.) How the releases occurred or may occur;
- c.) What hazardous materials were released or may be released;
- d.) What amount of each such hazardous material was so released;
- e.) Where such releases occurred or may occur, describing the location(s) and providing a map or diagram of such location(s);
- f.) Any and all activities undertaken in response to each release or threatened release;
- g.) Any and all investigations of the circumstances, nature, extent, or location of each such release or threatened release, including the results of any soil, water (ground & surface), or air testing

- that was undertaken;
- h.) Whether any report(s) of any such release(s) was (were) made to any public agency, and the content of that (those) report(s);
 - i.) All persons with information relating to subparts a. through h. of this Question.

Answer: Mercury Aerospace, Inc. has no knowledge of any leaks, spills or release or threat of release of any kind into the environment of any hazardous materials during the time of operation of this facility.

- a.) no
- b.) no
- c.) no
- d.) no
- e.) no
- f.) no
- g.) no
- h.) no
- i.) no

13. If any releases or threatened release identified in response to Question 12, above, occurred into any subsurface disposal system, floor drain, sump, or dry well inside or under any buildings located on the facility, further identify:

- a.) Precisely where the disposal system, floor drain, sump or dry well is and was located;
- b.) When the disposal system, floor drain, sump, or dry well was installed;
- c.) Whether the disposal system, floor drain, sump, or dry well was connected to pipes;
- d.) Where such pipes are or were located, describing the location(s) and providing a map or diagram of such location(s);
- e.) When such pipes were installed;
- f.) How and when such pipes were replaced, repaired, or otherwise changed.

Answer: Doesn't apply since Question 12 was answered negatively.

14. Is the facility currently connected to a sewer line? If so, identify the sewage system, date of connection, and type of wastes discharged. If you are or at some time operated the facility without a sewer line connection, identify the method of waste disposal that you use or did use. Specifically, have you or are you using leach field(s), septic tank(s), or any other method of disposal at the facility.

Answer: Refer to document Q.

15. Describe any acts or omissions of any persons, other than your employees, agents, or those persons with whom you had a contractual relationship, that may have caused the release or threat of release of hazardous substances at the facility and damages relating therefrom and identify such persons. In addition:

- a.) Describe all precautions that you took against foreseeable acts or omissions of any such third parties, and the consequence that could foreseeably result from such acts or omissions;
- b.) Describe the care you exercised with respect to the hazardous substances found at the facility.

Answer: Mercury Aerospace, Inc. is not aware of acts or omissions of any persons that may have caused the release of hazardous substances at the facility.

16. Identify all liability insurance policies held by Respondent from the time Respondent began operations at, assumed ownership of, or began leasing (whichever occurred earlier), the facility until the present. In identifying such policies, state:

- a.) The name and address of each insurer and of the insured;
- b.) The amount of coverage under each policies;
- c.) The commencement and expiration dates for each policy;
- d.) Whether or not the policy contains (or contained) a "pollution exclusion" clause;
- e.) Whether or not the policy covers (or covered) sudden, nonsudden, or both types of accidents.

In lieu of providing the information requested in subparts a. through e. of this Question, you may submit complete copies of all insurance policies that may cover the release or threatened release of hazardous materials.

Answer: We hereby submit document J.

17. Provide copies of all income tax returns sent to the Federal Internal Revenue Service in the last five years.

Answer: We hereby submit document K.

17. Provide all financial statements for the past five fiscal years, including, but not limited to, those filed with the federal and state Internal Revenue Service and Securities and Exchange Commission.

Answer: We hereby submit document L.

18. Identify all of Respondent's current assets and liabilities and the person(s) who currently own or are responsible for such assets and liabilities.

Answer: We hereby submit document M.

19. Identify all subsidiaries and parent corporations of Respondent.

Answer: We hereby submit document N.

20. Provide a copy of the most current Articles of Incorporation and By-laws of Respondent.

Answer: We hereby submit document O.

21. Identify the managers and majority shareholders of Respondent and the nature of their management duties or amount of shares held, respectively.

Answer: We hereby submit document P.

DOCUMENT (A)

PARCEL LEVEL INFORMATION GENERATED BY Q094603 ON 03/07/89

BOOK-PAGE-PARCEL: 2321 003 021

SITUS: 11800 SHERMAN WAY VAN NUYS CALIF 00000
PLANNING AREA: SUN VALLEY CENSUS TRACT: 122400
COUNCIL DIST: 07 DISTRICT MAP: 7454

TRACT BLK LOT ARB UNIT
LEGAL DESCRIPTION: MR31 39 - -65 -4 -

ZONE : M2-1 USECODE: 3100

BUILDING DESIGN: 3100 BUILDING CLASS: C6B YEAR BUILT: 75

LAND VALUE: \$ 172,456 IMPROVEMENT VALUE: \$ 495,043

OWNER(COUNTY): WOODHOUSE, RALPH CO TR LAST OWNER CHANGE: 03 -24 -87

FX-6 Personal Privacy

OWNER(CITY): BIRKEN, IRVING TR. (IRVING BIRKEN LIVIN AS OF DATE: 03 -24 -87

FX-6 Personal Privacy

PARCEL AREA(ACRES): 1.570 PARCEL AREA(SQ FT): 68,389

GROSS SQ FT: 36,640 TOTAL UNITS: 0 SQ FT/UNIT: 0

TOTAL BEDROOM : 0 TOTAL BATHROOM : 0

END OF REPORT

M E T E S A N D B O U N D S

BOOK-PAGE-PARCEL: 2321-003-021

OWNER NAME : WOODHOUSE, RALPH CO TR

SITUS ADDRESS : 11800 SHERMAN WAY
VAN NUYS CALIF 00000

PROPERTY OF THE LANKERSHIM RANCH LAND
AND WATER CO LOT COM AT INTERSECTION
OF S LINE OF SHERMAN WAY WITH SW LINE OF
LAND DESC IN O R 18242-78 TO L A CITY
SEE ASSESSOR MAPBOOK FOR MISSING PORTION
LOT 65

METES AND BOUNDS ARE FOR 'ON-LINE' DISPLAY O N L Y AND CAN
BE PRINTED O N L Y BY USING THE 'PRINT SCREEN' KEY.

END OF REPORT

LANKERSHIM RANCH LAND + WATER CO

PT 65

133-DISTRICT MAP NO.

169

(A)

000301

PRINTED FOR TITLE POLICY

RECEIVED
MAR 10 1989
Mercury Aerospace

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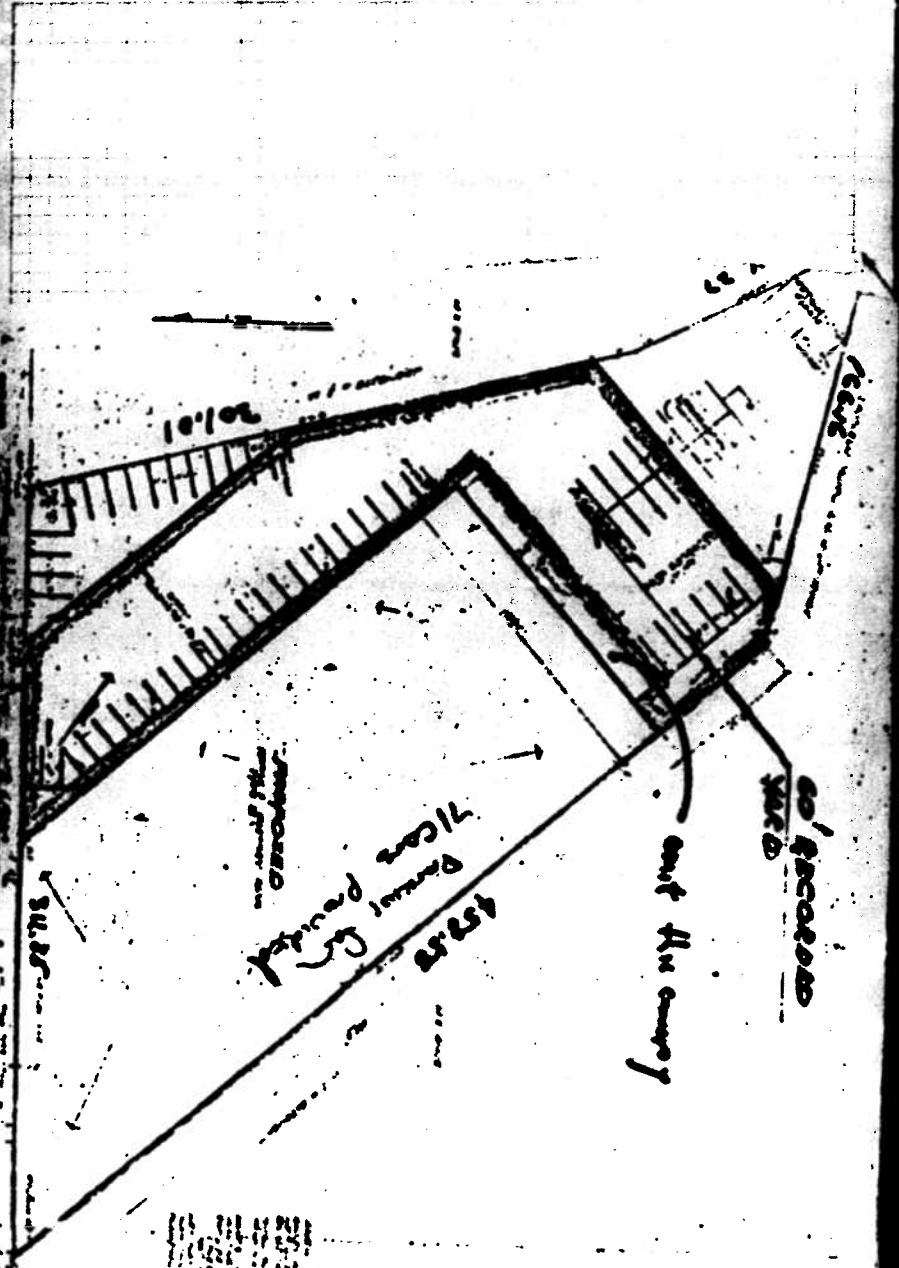
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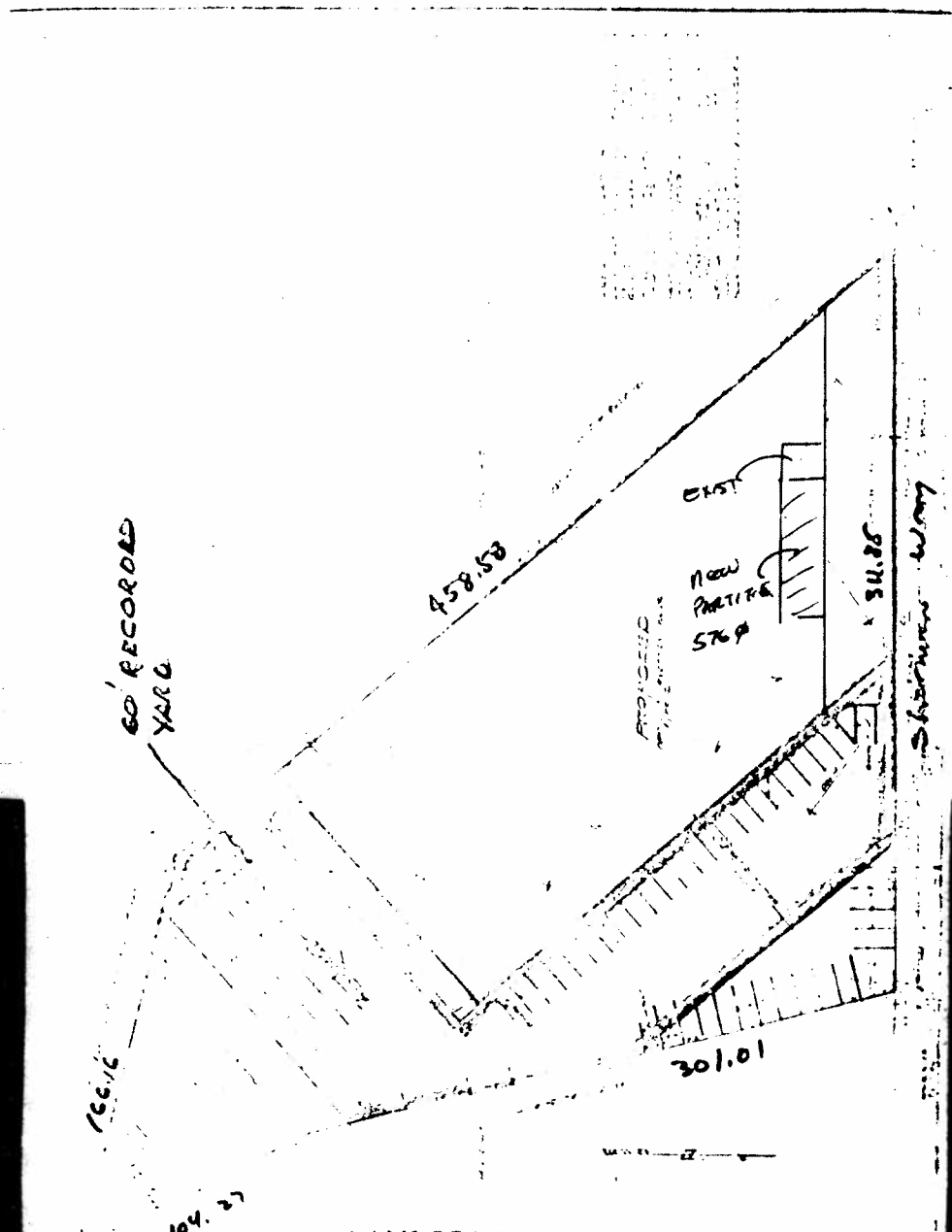
Date

ON PLOT PLAN SHOW THE BUILDING FOOTPRINT AND THE LOCATION OF THE CURB



3 CITY OF
 DISTRICT
 1. LOCAL ORDER
 2. PRESENT (12)
 3. ADDRESS 1180
 4. BETWEEN
 5. OWNER
 6. OWNER
 7. 1621
 8. HERM
 9. ALBION
 10. CONTRACT
 11. OWNER
 12. LENDER
 13. SIZE OF
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I certify
 Code of
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 of Loc-
 ation or soil
 Signed
 Bureau of
 Engineers



LANDSCAPE APPROVAL

Dept. of City Planning

7348	1436.02	6-2-2	Yes	50x100	20' Rear	ADDITIONS	NO USE	104.23	166.12	458.53	301.01	34.25	576 sq	CRIST	PROPOSED	NEW PARTIAL	60' RECORDED YARD	Shelton Way	LANDSCAPE APPROVAL	Dept. of City Planning
------	---------	-------	-----	--------	----------	-----------	--------	--------	--------	--------	--------	-------	--------	-------	----------	-------------	-------------------	-------------	--------------------	------------------------

17.00
20.00

Division of the Labor
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shall be
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Document (B)

88-1

ASSIGNMENT OF LEASE

Pursuant to the terms of the Purchase Agreement entered into on December 4, 1981, by and between MERCURY AEROSPACE FASTENERS, INC., a California corporation ("MERCURY"), and MICRODOT MANUFACTURING INC., a Delaware corporation ("MICRODOT"), MERCURY does hereby assign to MICRODOT all of its right, title, interest and obligations as Lessee under that certain Standard Industrial Lease, as amended, for an industrial building located at 11800 Sherman Way, in the city of North Hollywood, County of Los Angeles, State of California, dated, for reference purposes only, October 18, 1981, by and between IRVING BERKIN (sic) and RALPH WOODHOUSE, as Lessor, and MERCURY, as Lessee, a copy of which Standard Industrial Lease, as amended, has been delivered to MICRODOT and is attached as Exhibit "B" to the Purchase Agreement.

MERCURY does hereby further certify that it has paid to Lessor under said Standard Industrial Lease the sum of Twelve Thousand Six Hundred Seventy-five Dollars.
(512,675.00)
as rent for the period March 1, 1982 - March 31, 1982.

IN WITNESS WHEREOF, this Assignment of Lease has been executed on the 12th day of March, 1982, at Gencino, California.

MERCURY AEROSPACE FASTENERS, INC.
a California corporation

By: *Ralph E. Woodhouse*
RALPH WOODHOUSE
President

By: *Betsy Woodhouse*
BETSY WOODHOUSE
Secretary

000362

ACCEPTANCE OF ASSIGNMENT

MICRODOT MANUFACTURING INC., a Delaware corporation ("MICRODOT"), does hereby accept the assignment to it by MERCURY AEROSPACE FASTENERS, INC., a California corporation ("MERCURY"), pursuant to the terms of the Purchase Agreement entered into on December 4, 1981, by and between MERCURY and MICRODOT, of all of MERCURY's right, title, interest and obligations as Lessee under that certain Standard Industrial Lease, as amended, for an industrial building located at 11800 Sherman Way, in the city of North Hollywood, County of Los Angeles, State of California, dated, for reference purposes only, October 18, 1981, by and between IRVING BIRKIN (sic) and RALPH WOODHOUSE, as Lessor, and MERCURY, as Lessee, and MICRODOT does hereby agree to be bound by the terms and conditions of said Standard Industrial Lease, as amended, and to perform all of the obligations of Lessee thereunder accruing after the date hereof.

IN WITNESS WHEREOF, this Acceptance of Assignment has been executed on the 12 day of March, 1982, at La Angeles, Cal..

MICRODOT MANUFACTURING INC.,
a Delaware corporation

By: W-D Myers

STANDARD INDUSTRIAL LEASE

AMERICAN INDUSTRIAL REAL ESTATE ASSOCIATION



1. Parties. This Lease, dated for reference purposes only, October 18, 1981, is made by and between IRVING BERKIN and RALPH WOODHOUSE (herein called "Lessor") and Mercury Aerospace Fasteners, Inc. a California corporation (herein called "Lessee").

2. Premises. Lessor hereby leases to Lessee and Lessee leases from Lessor for the term, at the rental, and upon all of the conditions set forth herein, that certain real property situated in the County of Los Angeles, State of California, commonly known as 11800 Sherman Way, North Hollywood, Calif. and described as an industrial building situated on the real property legally described as:

This lease is an amendment to, and supercedes in its entirety, a lease between Lessor and Lessee dated

Said real property including the land and all improvements thereon, is herein called "the Premises".

3. Term.

3.1 Term. The term of this Lease shall be for ten (10) years commencing on March 1, 1982 and ending on February 28, 1992 unless sooner terminated pursuant to any provision hereof.

3.2 Delay in Commencement. Notwithstanding said commencement date, if for any reason Lessor cannot deliver possession of the Premises to Lessee on said date, Lessor shall not be subject to any liability therefor, nor shall such failure affect the validity of this Lease or the obligations of Lessee hereunder or extend the term hereof, but in such case Lessee shall not be obligated to pay rent until possession of the Premises is tendered to Lessee, provided, however, that if Lessor shall not have delivered possession of the Premises within sixty (60) days from said commencement date, Lessee may, at Lessee's option, by notice in writing to Lessor within ten (10) days thereafter, cancel this Lease, in which event the parties shall be discharged from all obligations hereunder. If Lessee occupies the Premises prior to said commencement date, such occupancy shall be subject to all provisions hereof, such occupancy shall not advance the termination date, and Lessee shall pay rent for such period at the usual monthly rates set forth below.

4. Rent: Special Net Lease.

4.1 Rent. Lessee shall pay to Lessor as rent for the Premises equal monthly payments of \$ 12,675.00 in advance, on the first of each month of the term hereof. Lessee shall pay Lessor upon the execution hereof \$ 12,675.00 as rent for first month of term. See ADDENDUM, Paragraph 18.

Rent for any period during the term hereof which is for less than one month shall be a pro rata portion of the monthly installment. Rent shall be payable in lawful money of the United States to Lessor at the address stated herein or to such other persons or at such other places as Lessor may designate in writing.

4.2 Special Net Lease. This Lease is what is commonly called a "Net, Net, Net Lease", it being understood that the Lessor shall receive the rent set forth in Paragraph 4.1 free and clear of any and all other impositions, taxes, liens, charges or expenses of any nature whatsoever in connection with the ownership and operation of the Premises. In addition to the rent reserved by Paragraph 4.1, Lessee shall pay to the parties respectively entitled thereto all impositions, insurance premiums, operating charges, maintenance charges, construction costs, and any other charges, costs and expenses which arise or may be contemplated under any provisions of this Lease during the term hereof. All of such charges, costs and expenses shall constitute additional rent, and upon the failure of Lessee to pay any of such costs, charges or expenses, Lessor shall have the same rights and remedies as otherwise provided in this Lease for the failure of Lessee to pay rent. It is the intention of the parties hereto that this Lease shall not be terminable for any reason by the Lessee, and that Lessee shall in no event be entitled to any abatement or reduction in rent payable under this Lease, except as herein expressly provided. Any present or future law to the contrary shall not alter this agreement of the parties.

5. Security Deposit. Lessee shall deposit with Lessor upon execution hereof \$ none as security for Lessee's faithful performance of Lessee's obligations hereunder. If Lessee fails to pay rent or other charges due hereunder, or otherwise defaults with respect to any provision of this Lease, Lessor may use, apply or retain all or any portion of said deposit for the payment of any rent or other charge in default or for the payment of any other sum to which Lessor may become obligated by reason of Lessee's default, or to compensate Lessor for any loss or damage which Lessor may suffer thereby. If Lessor so uses or applies all or any portion of said deposit, Lessee shall within ten (10) days after written demand therefor deposit cash with Lessor in an amount sufficient to restore said deposit to the full amount hereabove stated and Lessee's failure to do so shall be a material breach of this Lease. Lessor shall not be required to keep said deposit separate from its general accounts. If Lessee performs in strict Lessee's obligations hereunder, said deposit, or so much thereof as has not theretofore been applied or Lessor shall be returned, without payment of interest or other increment for its use, to Lessee or, at Lessor's option, to the last assignee, if any of Lessee's interest hereunder, at the expiration of the term hereof, and after Lessee has vacated the Premises. No trust relationship is created herein between Lessor and Lessee with respect to said Security Deposit.

6. Use.

6.1 Use. The Premises shall be used and occupied only for manufacturing and any lawful use and for no other purpose.

6.2 Compliance with Law.

(a) Lessor warrants to Lessee that the Premises, in its existing state, but without regard to the use for which Lessee will use the Premises, does not violate any applicable building code regulation or ordinance at the time that this Lease is executed. In the event that it is determined that this warranty has been violated, then it shall be the obligation of the Lessor, after written notice from Lessee, to promptly, at Lessor's sole cost and expense, to rectify any such violation. In the event that Lessee does not give to Lessor written notice of the violation of this warranty within 1 year from the commencement of the term of this Lease, it shall be conclusively deemed that such violation did not exist and the correction of the same shall be the obligation of the Lessee. The warranty contained in the paragraph 6.2 (a) shall be of no force or effect, if prior to the date of this Lease Lessee was the owner or occupant of the Premises.

(b) Except as provided in Paragraph 6.2 (a), Lessee shall, at Lessee's expense, comply promptly with all applicable statutes, ordinances, rules, regulations, orders, restrictions, decrees and requirements in effect during the term or any part of the term hereof regulating the use of the Premises. Lessee shall not use nor permit the use of the Premises in any manner that would tend to create waste or a nuisance or, if there shall be more than one tenant in the building containing the Premises, shall tend to disturb such other tenants.

6.3 Condition of Premises. Except as provided in Paragraph 6.2 (a), Lessee hereby accepts the Premises in their condition existing as of the date of the execution hereof, subject to all applicable zoning, municipal, county and state laws, ordinances and regulations governing and regulating the use of the Premises, and accepts this Lease subject thereto and to all matters disclosed thereby, and by any exhibits attached hereto. Lessee acknowledges that neither Lessor nor Lessor's agent has made any representation or warranty as to the suitability of the Premises for the conduct of Lessee's business.

SPECIAL NET

(This is a special form containing unique provisions and should only be used in special situations where the LESSEE will pay rent under all circumstances and in the event of destruction the LESSEE will rebuild under all circumstances.)

Initials

7.2 Surrender. On the last day of the term hereof or on any sooner termination, Lessee shall surrender the Premises to Lessor in the same condition as when received, plain clean, originally well kept and well equipped; less than normal wear and tear excepted. The Surrender shall include all improvements made by Lessee during its occupancy and equipment purchased pursuant to Paragraph 7.6(c), which repair shall include the patching and filling of holes and repair of structural damage.

7.4 **Lessor's Obligations.** Except for the obligations of Lessor under Paragraph 2.2(a) (relating to Lessor's warranty), and under Paragraph 2.3 (relating to condemnation or eminent domain), it is intended by the parties hereto that Lessor have no obligation, in any manner whatsoever, to repair or maintain the Premises or to provide any other services or to the equipment thereon, whether structural or non structural, all of which obligations are hereby assigned to the Lessee under Paragraph 2.1 hereof. Lessor expressly waives the benefit of any statute now or hereinafter in effect

7.5 Alterations and Additions.

(b) Any alterations, improvements and/or any Utility Installations in or about the Premises that Lessee shall desire to make and which requires the consent of the Lessor shall be presented to Lessor in written form, with proposed detailed plans. If Lessor shall give its consent that consent shall be given and concluded upon Lessee acquiring a permit to do so from appropriate governmental authority. The furnishing of a copy thereof to Lessor prior to the commencement of the work and the compliance by Lessee of all conditions of said permit in a prompt and specific

(d) Unless Lessor requires their removal as set forth in Paragraph 7.2(a), all alterations, improvements, additions and Utility Installations (whether or not such Utility Installations constitute trade fixtures of Lessee), which may be made on the Premises, shall become the property of Lessor and remain upon and be surrendered with the Premises at the expiration of the term. Notwithstanding the provisions of this Paragraph 7.2(d), Lessee's machinery and equipment, other than that which is affixed to the Premises so that it cannot be removed without material damage to the Premises, shall remain the property of Lessee and may be removed by Lessee subject to the provisions of Paragraph 7.2.

8.1. **Insuring Party.** As used in this Paragraph 8, the term "insuring party" shall mean the party who has the obligation to obtain the Property Insurance required hereunder. The insuring party shall be designated in Paragraph 16.26 hereof. Whether the insuring party is the Lessor or the Lessee, Lessee shall, as additional or rent for the Premises, pay the cost of all insurance required hereunder. If Lessor is the insuring party Lessee shall, within ten (10) days following demand by Lessor, reimburse Lessor for the cost of the insurance so obtained.

(a) The insuring party shall obtain and keep in force during the term of this Lease a policy or policies of insurance covering loss or damage to the Premises in the amount of the full replacement value thereof, as the same may exist from time to time, when replacement value is now \$ 1,000,000.

~~CONFIDENTIAL - SECURITY INFORMATION~~

(d) Not more frequently than each three years. If ~~the amount of~~ the amount of property insurance required hereunder is not adequate, the insuring party shall increase said insurance coverage as required by Lessor. However, such increase may be more frequent than each three years if required by the insurance carrier in order to maintain insurance for the full replacement value of the Premises.

8.5 Waiver of Subrogation. Lessee and Lessor each hereby waive any and all rights of recovery against the other or against the officers, employees, agents and representatives of the other for loss of or damage to such waiving party or its property or the property of others under control to the extent that such loss or damage is insured against under any insurance policy in force at the time of such loss or damages. The insuring party shall, upon obtaining the proceeds of insurance required hereunder, give notice to the insurance carrier or carriers that the foregoing mutual waiver of subrogation is contained in this Lease.

2000

Lessee upon notice from Lessor shall defend the same at Lessee's expense by counsel satisfactory to Lessor. Lessee as a material part of its consideration to Lessor hereby assumes all risk of damage to property or injury to persons in, upon or about the Premises arising from any cause, and Lessee hereby waives all claims in respect thereof against Lessor.

and Lessee hereby warrants Lessee's right to the space as Lessor.

8.7.11. Exemption of Lessor from Liability. LESSEE AGREES that Lessor shall not be liable for injury to Lessee's business or any loss of income or earnings or of damage to or loss of property of Lessee, Lessee's employees, invitees, customers or any other person in or about the Premises nor shall Lessor be liable for any injury to or damage to or loss of property of Lessee, Lessee's employees, invitees, customers or any other person in or about the Premises caused by or results from the steam, electricity, or from the drainage, sewage, construction or other defects of the building, its walls, appliances, plumbing, air conditioning or heating system, or from the drainage, sewage, construction or damage or injury to itself from conditions arising upon the Premises or upon other portions of the building of which the Premises are a part, or from other sources or places, and legal basis of whether the cause of such damage or injury or the means of repairing the same is inaccessible to Lessee. Lessor shall not be liable for any damage or injury to any part of, nor death of any employee of, Lessee, its customers or invitees, or any other person in or about the Premises.

B. Damages, Destruction, Obligation to Rebuild, and Abatement

§ 1 Obligation is Rebutted in instances that some or all of the improvements constituting a part of the Premises or the Premises itself are damaged or destroyed, partially or totally from any cause whatsoever, whether or not such damage or destruction is covered by any insurance required to be maintained under Paragraph § 1 hereof, then Lessee shall repair, restore and rebuild the Premises to its condition existing immediately prior to such damage or destruction, and this Lessee shall remain in full force and effect. Such repair, restoration and rebuilding (all of which is herein called "repair") shall be commenced within a reasonable time after such damage or destruction has occurred and shall be diligently pursued to completion.

9.2 Insurance Proceeds. The proceeds of any insurance maintained under Paragraph 8.3 hereof shall be made available to Lessee (or to the beneficiary of such insurance) provided however that such proceeds may be made available to Lessee subject to the following conditions, including, but not limited to, architect's certification of cost, retention of a percentage of such proceeds pending recalculation of a notice of completion, and the requirement to insure against mechanical and materials items existing out of the repair and to insure completion of the repair, and in the expense of Lessee. In the event of a total loss of the building, then any amounts disbursed over the amount of the insurance proceeds received that are required to complete said repair shall be paid by Lessee. In the event of a partial loss, then any amounts made available to Lessee within 120 days after such damage or destruction, unless the amount of insurance coverage is in dispute with the insurance carrier, shall be paid by Lessee within 30 days commencing on the expiration of such 120 day period of canceling this Lease. If Lessee shall not exercise such option, Lessee shall have 30 days commencing on the expiration of such 120 day period of canceling this Lease in which to exercise said option, shall exercise said option by giving written notice to Lessor within said 30 day period, time being of the essence.

9.3. **Damage Near End of Term.** If the Premises are partially destroyed or damaged during the last six months of the term of this Lease, Lessor may at Lessor's option cancel and terminate this Lease as of the date of occurrence of such damage by giving written notice to Lessee of Lessor's election to do so within 30 days after the date of occurrence of such damage.

§ 4. Abatement of Rent. Notwithstanding the partial or total destruction of the Premises and any part thereof, and notwithstanding whether the casualty is insured or not, there shall be no abatement of rent or of any other obligation of Lessee hereunder by reason of such damage or destruction unless the Lease is terminated by virtue of other express terms of this Lease.

9.5 Termination — Advance Payments. Upon termination of this Lease pursuant to this Paragraph 9, an equitable adjustment shall be made concerning advance rent and any advance payments made by Lessee to Lessor. Lessor shall, in addition, return to Lessee so much of Lessee's security deposit as has not theretofore been applied by Lessor.

8.B. Waiver. Lessee waives the provisions of California Civil Code Sections 1932 (2) and 1933 (4) which relate to termination of leases when the thing leased is destroyed and agrees that such event shall be governed by the terms of this Lease.

18. Real Property Taxes

10.1 **Payment of Taxes.** Lessee shall pay all real property taxes applicable to the Premises during the term of this Lease. All such payments shall be made at least ten (10) days prior to the due date of such payment. Lessee shall promptly furnish Lessor with satisfactory evidence that such taxes have been paid. If any such taxes paid by Lessee shall cover any period of time prior to, or after the expiration of, the term hereof, Lessor shall not be obligated to reimburse Lessee for such taxes. If any such taxes shall be paid by Lessee for a period of time during which this Lease shall be in effect, and Lessor shall reimburse Lessee to the extent required, if Lessee shall fail to pay any such taxes, Lessor shall have the right to pay the same. In which case Lessee shall repay such amount to Lessor with Lessee's next rent installment together with interest at the rate of 10% per annum.

10.2 Definition of "Real Property Tax." As used herein, the term "real property tax" shall include any local, state or federal assessment, license fee, commercial rental tax, levy, density, or tax (other than inheritance or estate taxes), imposed by any authority having jurisdiction over real property, including any city, county, state or federal government, of any school, agricultural, lighting, drainage or other improvement district, or any other agency's any legal or equitable interest of Lessor in the Premises or in the real property of the Premises are a part, as against Lessor's right to use, occupy, or alienate, or as against Lessor's business of leasing the Premises or any tax imposed in substitution, partially or totally, of any tax previously included within the definition of real property tax, or any additional tax the nature of which was previously included within the definition of real property tax.

10.3 **Joint Assessment.** If the Premises are not separately assessed, Lessee's liability shall be an equitable proportion of the real property taxes for all of the land and improvements included within the tax parcel assessed, such proportion to be determined by Lessor from the respective valuations assigned in the assessor's reports or such other information as may be reasonably available. Lessor's reasonable determination thereof, in good faith, shall be conclusive.

10.4 Personal Property Taxes.

(d) Lessee shall pay prior to delinquency all taxes assessed against and levied upon trade fixtures, furnishings, equipment and all other personal property of Lessee contained in the Premises or elsewhere. When possible, Lessee shall cause said trade fixtures, furnishings, equipment and all other personal property to be assessed and billed separately from the real property of Lessor.

(b) If any of Lessee's said personal property shall be assessed with Lessor's real property, Lessee shall pay Lessor the taxes attributable to Lessee within 10 days after receipt of a written statement setting forth the taxes applicable to Lessee's property.

11. Urgency

Lessee shall pay for all water, gas, heat, light, power, telephone and other utilities and services supplied to the Premises, together with any taxes thereon. If any such services are not separately metered to Lessee, Lessee shall pay a reasonable proportion to be determined by Lessor of all charges jointly incurred with other premises.

~~TOP SECRET FOR EYES ONLY~~

12.1 Leasee's Consent Required Lessee shall not voluntarily or by operation of law assign, transfer, mortgage, sublet or otherwise dispose of or encumber all or any portion of the Premises' interest in the Lease or in the Premises, without Lessor's prior written consent, which Lessor shall not unreasonably withhold. Any attempted assignment, transfer, mortgage, encumbrance or subletting without such consent shall be void and shall constitute a breach of this Lease.

~~12.2 Lessee Affiliates. Notwithstanding the provisions of Paragraph 12.1, Lessee may assign or sublet the Premises, or any portion thereof, without Lessor's consent, to any corporation wholly owned, controlled or commonly controlled by Lessee, or to any corporation resulting from the merger or consolidation of Lessee, or to any person or entity which assumes, in full, the obligations of Lessee as a going concern of the business that is being conveyed under the Premises, provided that said assignee assumes, in full, the obligations of Lessee under this Lease. Any such assignment shall not in any way affect or limit the liability of Lessee under the terms of this Lease even if, after such assignment, Lessee ceases to exist. Lessee shall be jointly and severally liable with the assignee for the performance of the obligations of Lessee under this Lease, including the obligation to pay the Rent, until the assignee has been released by Lessor without the consent of Lessee. The consent of Lessor shall not be necessary.~~

[illegible]

13. Defaults: Remarks

12.1 Defaults. The occurrence of any one or more of the following events shall constitute a material default and breach of this Lease by Lessee:

(a) The vacating or abandonment of the Premises by Lessee.

(d) The failure by Lessee to make any payment of rent or any other payment required to be made by Lessee hereunder as and when due shall constitute a default by Lessee hereunder and shall continue for a period of three days after written notice thereof from Lessor to Lessee.

(C) The failure by Lessee to observe or perform any of the Covenants, conditions or provisions of this Lease to be observed or performed by Lessee, other than described in paragraph (B) above, where such failure shall continue for a period of 30 days, after written notice is received from Lessor to Lessee, provided, however, that if the nature of Lessee's default is such that more than 30 days are reasonable, required for it to cure its default, then it shall be deemed to be in default if Lessee commenced such cure within said 30-day period and thereafter diligently pursued such cure to completion.

14.11. The making by Lessee of any general assignment or general arrangement for the benefit of creditors, or the filing by or against Lessee of a petition to have Lessee adjudged bankrupt or a petition for reorganization or arrangement under any law relating to bankruptcy, insolvency, or the insolvency of any Lessee's assets located in any of the States of the United States, or the appointment of a trustee or receiver to take possession of any of the assets or the appointment or execution of a receiver of any of the assets of Lessee, or the appointment of a receiver of any of the assets of Lessee, where such seizure is not discontinued within 30 days.

181 The disclosure of Lessor and any financial statement given to Lessor by Lessee, any assignee of Lessor, any subtenant of Lessee, any successor in interest of Lessee or any guarantor of Lessee's obligations hereunder, and any other, was materially false.

• or any extension hereof

13.2 Remedies. In the event of any such material default or breach by Lessee, Lessor may at any time thereafter, with or without notice or demand and without limiting Lessee in the exercise of any right or remedy which Lessor may have by reason of such default or breach:

[illegible]

The Rightless Lessee's right to possession in which it has been deprived, together with its rights and remedies under this Lease, shall survive the termination or expiration of this Lease.

In such event Lessor shall be entitled to enforce all of Lessor's rights and remedies under this Lease, including the right to recover the rent as if becomes due hereunder.

(c) Plus any other remedy now or hereafter available to Lessor under the laws or judicial decisions of the State in which the Premises are located.

13.3 **Default by Lessor.** Lessor shall not be in default unless Lessor fails to perform obligations required of Lessor within a reasonable time, but in no event later than thirty (30) days after written notice by Lessee to Lessor and to the holder of any first mortgage or deed of trust covering the Premises whose name and address such holder has previously been furnished to Lessee in writing, specifying wherein Lessor has failed to perform such obligations, provided however that if the nature of Lessor's obligation is such that more than thirty (30) days are required for performance then Lessor shall not be in default if Lessor commences performance within such 30-day period and thereafter diligently prosecutes the same to completion.

[illegible][illegible]

[illegible]

16. General Provisions

16.1 Escalpel Certificate.

(a) Lessee shall file any time upon not less than ten (10) days' prior written notice from Lessor execute, acknowledge and deliver to Lessor a statement in writing certifying that this Lease is unmodified and in full force and effect (or if modified, stating the nature of such modification and certifying that this Lease, as so modified, is in full force and effect) and the date to which the rent and other covenants are paid in advance if any, and (b) acknowledging that there are not 10 Lessee's knowledge, any unrecorded defaults on the part of Lessor hereunder, or specifying such defaults if any are claimed. Any such statement may be conclusively relied upon by any prospective purchaser or encumbrance of the Premises.

(b) Lessee's failure to deliver such statement within such time shall be conclusive upon Lessee (i) that this Lease is in full force and effect, without modification or excise as may be reauthorized by Lessor (ii) that there are no uncorrected defaults in Lessor's performance, and (iii) that not more than one month's rent has been paid in advance of such failure may be considered by Lessor as a waiver of Lessee's obligation to deliver such statement.

16) If Lessor desires to finance or refinance the Premises, or any part thereof, Lessee hereby agrees to deliver to any lender designated by Lessor such financial statements of Lessee as may be reasonably required by such lender. Such statements shall include the past three years' financial statements of Lessee. All such financial statements shall be received in confidence and shall be used only for the purpose intended.

16.2. **Lessor's Liability.** The term "Lessor" as used herein shall mean only the owner or owners at the time in question of the fee title or a lesser interest in a ground vessel of the Premises, and except as expressly provided in Paragraph "5" in the event of any transfer of such title or interest, Lessor herein named (and in case of any subsequent transfer the then grantor) shall be relieved from and after the date of such transfer of all liability in respect to Lessor's obligations hereafter to be performed, provided that in no case in the hands of Lessor or the then grantor at the time of such transfer in which Lessee has an interest, shall be delivered to the grantee. The obligations contained in this Lease to be performed by Lessor or such transferee as aforesaid, shall be binding on Lessor.

16.3 **Severability.** The invalidity of any provision of this Lease as determined by a court of competent jurisdiction, shall in no way effect the validity of any other provision hereof.

16.4. Interest on Past-due Payments. Except as expressly herein provided, any amount due Lessor not paid when due shall bear interest at 10% per annum from the date due. Payment of such interest shall not excuse or cure any default by Lessee under this Lease provided, however, that interest shall not be payable on late charges incurred by Lessee nor on any amounts upon which late charges are paid by Lessee.

18.3 Time of Essence. Time is of the essence

16.6 Captions. Article and paragraph captions are not a part hereof.

16.7 Incorporation of Prior Agreements, Amendments. This Lease contains all agreements of the parties with respect to any matter mentioned herein. No prior agreement or understanding pertaining to any such matter shall be effective. This Lease may be modified in writing only, signed by the parties in interest at the time of the modification. Except as otherwise stated in this Lease, Lessee hereby acknowledges that neither the real estate broker listed in Paragraph 15 hereof nor any cooperating broker on this transaction nor the Lessor or any employees or agents of any of said persons has made any oral or written warranties or representations to Lessee relative to the condition or use by Lessee of said Premises and Lessee acknowledges that Lessee assumes all responsibility regarding the Occupational Safety Health Act or the legal use of adequacy of the Premises and the compliance thereof to all applicable laws and regulations enacted during the term of this Lease except as otherwise specifically stated in this Lease.

16.8 Notices. Any notice required or permitted to be given hereunder shall be in writing and may be given by personal delivery or by certified mail, and if given personally or by mail, shall be deemed sufficiently given if addressed to Lessee or to Lessor at the address noted below the signature of the respective parties as the case may be. Either party may also give notice to the other by specifying a different address for notice purposes except that upon Lessee's taking possession of the Premises, the Premises shall constitute Lessee's address for notice purposes. A copy of all notices required or permitted to be given to Lessor hereunder shall be concurrently transmitted to such certificate holder or holders if such addresses as Lessor may

See ADDENDUM, Paragraph 20

[illegible]

16 10 According

short form memorandum of this Lease for recording purposes.

16.11. If Holding Over, If Lessee remains in possession of the Premises or any part thereof after the expiration of the term hereof without the express written consent of the Lessor, such occupancy shall be a tenancy from month to month at a rental in the amount of the last monthly rental plus 25% per cent per annum hereunder, and upon all the terms hereof applicable to a month to month tenancy.

§ 17 Cumulative Remedies. No remedy or election hereunder shall be deemed exclusive but shall wherever possible be cumulative with all other remedies at law or in equity.

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THIS IS AN ADDENDUM TO THE FOLLOWING LEASE:

Dated for reference purposes only:

LESSOR: IRVING BERKEN and WILHELM WOODHOUSE

Lessee: MERCURY AEROSPACE FASTENERS, INC., a California corporation

For the premises commonly known as 11800 Sherman Way
North Hollywood, California

17. Lessee is given the Option to extend the term of this Lease for two (2) successive 5-year periods each, as follows, but otherwise on the same terms, covenants and conditions herein.

17.1 Lessee shall give Lessor notice of exercise of each Option at least six (6) months before the expiration of the original term, or of the first extended Option Term, as applicable.

17.2 The rental during each of the two extended Option Terms shall be determined as set forth in Paragraph 18 below.

17.3 The Options to extend are not personal to Lessee and may be assigned or otherwise transferred.

18. The monthly rental for the 61st through the 120th month of the original 10-year term of this Lease, and the monthly rental during each of the two successive 5-year Option Extended Terms of this Lease shall be set as follows:



18.1 If the parties agree on the monthly rental for the applicable term at least 120 days prior to the commencement of the applicable term, they shall immediately execute an amendment to this Lease stating the monthly rent during the applicable term (to wit, for the 61st through the 120th month of the original term, or the first or second extended Option Term, as the case may be). If the parties do not agree or do not execute such amendment to this Lease at least 120 days before the commencement of the applicable term, as provided hereinabove in this Paragraph, then the monthly rent for the applicable term shall be set in the manner provided in Paragraph 18.2 below.

18.2 On or before the 100th day prior to commencement of the applicable term, Lessor and Lessee shall each appoint an appraiser and give written notice of the name and address of such appraiser to the other party to this Lease. The two appraisers thus appointed shall within twenty (20) days after the appointment of the last of the two appraisers to be appointed, appoint a third appraiser and serve written notice of the name and address of such appraiser on Lessor and Lessee in the manner prescribed by this Lease for service of notice on each party to the Lease. If a party to this Lease does not appoint an appraiser within ten (10) days after the other party has given notice of the appraiser, the single appraiser appointed shall be the sole appraiser and shall set the monthly rent for the extended period. If the two appraisers are appointed by the parties as stated herein, they shall meet and attempt to set the monthly rent for the applicable term based upon the market value and the use of the premises specified in this Lease in the County where the premises are located. If the two appraisers are unable to agree within thirty (30) days after the

second appraiser has been appointed, they shall select a third appraiser within ten (10) days after the last day the two appraisers are given to set the monthly rent for the applicable period. If they are unable to agree on the third appraiser, then either of the parties may have the monthly rent for the applicable term set by arbitration in accordance with the rules of the American Arbitration Association at Los Angeles, California. Within thirty (30) days after the selection of the second appraiser, the appraised value shall be agreed upon in writing by any two of the three appointed appraisers. If a majority of the appraisers are unable to set the monthly rental within the stipulated period of time, the three appraisals shall be added together and their total divided by three; the resulting quotient shall be the monthly rent for the applicable period and shall be binding upon the Lessor and Lessee. If, however, the low appraisal and/or the high appraisal are/is more than fifteen percent (15%) lower and/or higher than the middle appraisal, the low appraisal and/or the high appraisal shall be disregarded. If only one appraisal is disregarded, the remaining two appraisals shall be added together and their total divided by two; the resulting quotient shall be the monthly rental for the applicable term. If both the low and the high appraisals are disregarded as stated in this paragraph, the middle appraisal shall be the monthly rental for the applicable period. Lessor and Lessee shall each pay the fee and all expenses incurred by the appraiser appointed by each of them, and one-half (1/2) of all expenses and the fee incurred by the third appraiser appointed hereunder; and one-half (1/2) of the American Arbitration Association fees and expenses, if any. After the applicable monthly rent has been set, the appraisers shall immediately notify the parties. If Lessee objects to the monthly rent that has been set for the first Option Extended Term, Lessee shall have the right to have this Lease expire at the end of the original 10-year term; and similarly, if Lessee objects to the monthly rent that has been set for the Second Option Extended Term, Lessee shall have the right to have this Lease expire at the end of the First Option 5-year Extended Term; provided, that Lessee pays all costs in connection with the appraisal procedure that set the option monthly rent. Lessee's election to allow this Lease to expire as provided above must be exercised within thirty (30) days after receipt of notice of the appraised monthly rent for the applicable period. If Lessee does not exercise its said election within said 30-day period by giving written notice of said election to Lessor, the term of this Lease shall be extended as provided in this Lease.

19. Lessor and Lessee have agreed in this Lease that Lessee shall be liable for Real Property Taxes and assessments on the Premises to the extent provided herein. However, notwithstanding anything to the contrary in this Lease, the parties recognize that said Real Property Taxes and assessments may be increased because of a "change in ownership" and/or new construction, as "newly constructed" or "change in ownership" are referred to or defined in California Constitution, Article XIII A (Proposition 13 approved at the primary election held June 6, 1978) and in California legislation and Rules and Regulations pursuant thereto, now existing or as may be amended or supplemented in the future from time to time. Therefore, Lessor and Lessee further agree that in the event that the Real Property Taxes or assessments are increased on the Premises because of, or resulting from, said Article XIII A (including, but not limited to: (a) said change in ownership or said new construction; (b) a determination that a change in ownership, purchase, or new construction has occurred after March 1, 1975, and prior to March 1, 1978, (c) a determination that Article



~~XIII-A of the California Constitution has been improperly applied, or (d) the enactment of subsequent Constitutional amendments, statutes or administrative rules or regulations implementing or supplementing the same subject matter as said Article XIII-A;~~ then Lessor (and Lessor's successors-in-interest, assigns, representatives and heirs), and not Lessee, shall be liable for such Real Property Taxes and assessment increase.

20. A copy of all notices to be given to Lessee hereunder must also be given to Microdot Manufacturing, Inc., at 23 Old Kings Highway South, Darien, Connecticut 06820, in the manner provided in Paragraph 16.8 of this Lease.

21. Alterations and Additions.

The following is substituted in place of subparagraph 7.5(a) which has been deleted:


(a) Lessee shall have the right to make such alterations, improvements, additions and utility installations (bus ducting, power panels, wiring, fluorescent fixtures, space heaters, conduits, air conditioning equipment and plumbing), in on or about the premises as Lessee shall deem desirable for the proper operation of Lessee's business, provided that none of such alterations, improvements, additions or installations adversely affect the structural integrity of the premises or materially reduce their value.

22. Signs.

Notwithstanding the provisions of paragraph 16.18, Lessee may maintain signs on the premises of a size and style reasonably satisfactory to Lessor.







CERTIFICATE OF LESSOR

The undersigned, Ralph Woodhouse, is one of two lessors under the Standard Industrial Lease (the "Lease") dated October 18, 1981 between Irving Berkin and Ralph Woodhouse (the "Lessor"), and Mercury Aerospace Fasteners, Inc., a California corporation, as Lessee.

In connection with the Lease, the undersigned certifies to Mercury Aerospace Inc., a Delaware corporation, as follows:

1. A complete copy of the Lease, as amended and as currently in effect, is attached to this Certificate as Exhibit A.

2. The Lease has been assigned by the original lessee named above to Microdot, Inc., Mercury Aerospace Division ("Microdot"). Microdot is the current lessee under the Lease.

3. The current monthly rent is \$15,862.

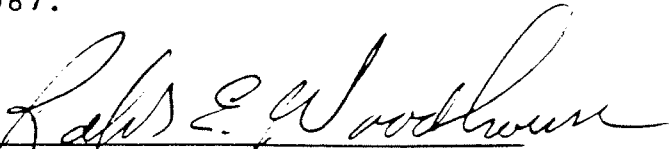
4. All payments due and payable to the Lessor under the Lease as of this date have been paid.

5. To the best of the undersigned's knowledge, there is no default under the Lease and no event has occurred which with notice or the passage of time would constitute an event of default under the Lease.

6. The undersigned is not aware of any other assignment of the Lease or of any interest in the Lease by the original lessee or by Microdot.

The undersigned acknowledges that the above information is being provided to Mercury Aerospace Inc. in connection with its assumption of the Lease from Microdot and that Mercury Aerospace Inc. is entitled to rely on such information.

IN WITNESS WHEREOF, the undersigned has executed this Certificate on July 21, 1987.


Ralph Woodhouse

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By SIGNING THIS CERTIFICATE OF LESSOR, LESSOR DOES NOT RELEASE MICRODOT OF ANY OF MICRODOT'S CURRENT OR PROSPECTIVE OBLIGATIONS OF THE LEASE, NOR DOES LESSOR CONSENT TO ANY ASSIGNMENT OF THE LEASE.

ΣΧΗΒΠΑ
~~SECRET~~



California corporation (herein called "Lessor") and Mercury Aerospace Fasteners, Inc. a
 2. Premises. Lessor hereby leases to _____ (herein called "Lessee") _____

This lease is an amendment to, and supercedes in its entirety, a lease between Lessor and Lessee dated _____.

1 Term

3.2 Delay in Commencement. Notwithstanding said commencement date, if for any reason Lessee cannot enter the premises on said date, Lessor shall not be subject to any liability therefor, nor shall such failure affect the validity of this Lease or the Lessee's hereunder or extend the term hereof, but in such case Lessee shall not be obligated to pay rent until possession of the Premises is delivered; provided, however, that if Lessor shall not have delivered possession of the Premises within sixty (60) days from said date, Lessee may, at Lessee's option, by notice in writing to Lessor within ten (10) days thereafter, cancel this Lease, in which event Lessor shall be discharged from all obligations hereunder. If Lessee occupies the Premises prior to said commencement date, then occupancy of all provisions hereof, such occupancy shall not advance the termination date, and Lessee shall pay rent for such period at the initial rate set forth below.

Rent for any period during the term hereof which is for less than one month shall be a pro rata portion of the monthly figure above stated. Payment of rent shall be made in lawful money of the United States to Lessor at the address stated herein or in such other address as may be designated in writing.

4.2. **Special Net Lease.** This Lease is what is commonly called a "Net, Net, Net Lease", it being understood that the Lessor shall receive the term net forth in Paragraph 4.1, free and clear of any and all other impositions, taxes, liens, charges or expenses of any kind whatsoever in connection with the ownership and operation of the Premises. In addition to the rent received by Paragraph 4.1, Lessee shall pay to the Lessor, respectively, all the following expenses which arise or may be contemplated under any provisions of this Lease during the term hereof: All of such taxes, costs and expenses shall constitute additional rent, and upon the failure of Lessee to pay any of such costs, charges or expenses, Lessor shall have the same right and remedy as otherwise provided in this Lease for the failure of Lessee to pay rent. It is the intention of the parties hereto that all these amounts shall be payable by Lessee, except as herein expressly provided. Any present or future law to the contrary shall not affect this agreement of reduction in rent payable under this Lease's obligation.

5. **Security Deposit.** Lessee shall deposit with Lessor upon execution of this Lease a sum of \$10,000.00 as security for the performance of the obligations of Lessee under this Lease.

2. Security Deposit. Lessors shall deposit with Lessor upon execution hereof \$ none as security for Lessee's faithful performance of Lessee's obligations hereunder. If Lessee fails to perform or other charges due hereunder, or otherwise defaults with respect to any provision of this Lease, Lessor may use, sell, or otherwise dispose of the deposit for the payment of any rent or other charges in default or for the payment of any other claim to which Lessor may become obligated by reason of Lessee's default, or to compensate Lessor for any loss or damage which Lessor may suffer or be obliged to pay or to apply all or any portion of said deposit to the full amount hereinafter stated and Lessee's failure to do so shall be a material breach of this Lease. Lessor shall not be required to keep said deposit separate from its general accounts. If Lessee performs all of Lessee's obligations hereunder, or if Lessee, or such other person as has not been assigned to be assigned by Lessor, shall be returned, with all interest thereon, to Lessee (or, at Lessee's option, to the last assignee, if any of Lessee's interest hereunder) at the expiration of the term of this Lease, and after Lessee has vacated the Premises, the trust relationship is created herein between Lessor and Lessee with respect to the Security Deposit.

B. Use.

8. Use.

8.1 Use. The Premises shall be used and occupied only for manufacturing and any lawful use

6.2 Compliance with Law, end for no other purpose

[illegible]

6.3 Condition at Premises. Except if provided in Paragraph 6.2, the Lessee shall not be permitted to use the Premises in any manner that will tend to create waste or a nuisance or to disturb such other tenants or occupants of the Premises. The Lessee shall not be permitted to use the Premises in any manner that will tend to create waste or a nuisance or to disturb such other tenants or occupants of the Premises.

6.3 Condition of Premises. Except as provided in Paragraph 6.2 (1)(c), the Tenant hereby accepts the Premises in their condition existing at the time of the execution hereof, subject to any applicable zoning, municipal, county and state laws, ordinances and regulations governing and regulating the use of the Premises. The Tenant acknowledges that neither Lessor nor Lessor's Agent has made any representation or warranty as to the suitability of the Premises for the conduct of the Tenant's business.

SPECIAL KEY

(This is a Special form containing unique provisions and should only be used in special situations where the LESSEE will own the property.)

7. Maintenance, Repairs and Alterations.

7.1 Lessee's Obligations. Lessee shall keep in good order, condition and repair the Premises and every part thereof, structural and structural (whether or not such portion of the Premises requires repair, or the means of restoring the same to satisfactory or ready occupancy and Lessee, and whether or not the need for such repairs occurs as a result of Lessee's use, any prior use, the elements or the age of such portion of the Premises including, without limiting the generality of the foregoing, all plumbing, heating, air conditioning, ventilating, electrical lighting fixtures, equipment, stairs, the Premises, fixtures, walls (interior and exterior), foundations, ceilings, roofs (interior and exterior), floors, windows, doors, glass and sashings located within the Premises, and all landscaping, driveways, parking lots, fences and signs located on the Premises, sidewalks and pathways adjacent to the Premises.

7.2 Surrender. On the last day of the term hereof, or on any sooner termination, Lessee shall surrender the Premises to Lessor in the condition as when received, broom clean, ordinary wear and tear excepted. Lessee shall repair any damage to the Premises occasioned by removal of Lessee's trade fixtures, furnishings and equipment pursuant to Paragraph 7.5(d), which repair shall include the painting and trim holes and repair of structural damage.

7.3 Lessor's Rights. If Lessee fails to perform Lessee's obligation under this Paragraph 7, Lessor may at its option but shall not be required to enter upon the Premises, after ten (10) days prior written notice to Lessee, and put the same in good order, condition and repair, and the cost thereof together with interest thereon at the rate of 10% per annum shall become due and payable as additional rental to Lessor together with Lessee's rental installment.

7.4 Lessor's Obligations. Except for the obligations of Lessor under Paragraph 6.2(a) (relating to Lessor's warranty), and under Paragraph 7.1 (relating to condemnation of the Premises), it is intended by the parties hereto that Lessor have no obligation, in any manner whatsoever, to repair and maintain the Premises nor the building located thereon nor the equipment therein, whether structural or non structural, all of which obligations are intended to be that of the Lessee under Paragraph 7.1 hereof. Lessee expressly waives the benefit of any statute now or hereinafter in effect which would otherwise afford Lessee the right to make repairs at Lessor's expense or to terminate this Lease because of Lessor's failure to keep the Premises in good order, condition and repair.

7.5 Alterations and Additions.

(a) Lessee shall not make any alterations, improvements, additions or utility installations in or about the Premises, except for nonstructural alterations not exceeding \$1,000 in cost. As used in this Paragraph 7.5 the term "utility install" shall mean but not be limited to, power panels, wiring, fluorescent fixtures, space heaters, convectors, air conditioning equipment and plumbing. Lessor requires that Lessee remove in place of said alterations, improvements, additions or utility installations at the expiration of the term, and restore the Premises to their prior condition. Lessor may require Lessee to provide Lessor, at Lessee's sole cost and expense, a lien and completion bond amount equal to one and one-half times the estimated cost of such improvements, alterations or utility installations. Lessee shall be liable for mechanic's materialsmen liens and to insure completion of the work. ~~Should Lessee make any alterations, improvements, additions or utility installations without the prior approval of Lessor, Lessor may require that Lessee remove and replace all of the same.~~

(b) Any alterations, improvements, additions or utility installations in or about the Premises that Lessee shall desire to make and requires the consent of the Lessor shall be presented to Lessor in written form, with proposed detailed plans. If Lessor shall give its consent consent shall be deemed conditioned upon Lessee acquiring a permit to do so from appropriate governmental authority for the furnishing of the same to Lessor prior to the commencement of the work and the compliance by Lessee of all conditions of said permit in a prompt and expeditious manner.

(c) Lessee shall pay, when due, all claims for labor or materials furnished or alleged to have been furnished to or for Lessee at or for the Premises, which claims are or may be secured by any mechanic's or materialsman's lien against the Premises or any interest therein. Lessee shall not less than ten (10) days prior to the commencement of any work in the Premises, and Lessee shall have the right to posting of non-responsibility in or on the Premises as provided by law. If Lessee shall, in good faith, contest the validity of any such lien, claim or demand, then Lessee shall, at its sole expense defend itself and Lessor against the same and shall pay and satisfy any such adverse judgment that may be rendered thereon before the enforcement thereof against the Lessor or the Premises, upon the condition that if Lessor shall require, Lessee shall furnish to Lessor a surety bond satisfactory to Lessor in an amount equal to such contested lien, claim or demand indemnifying Lessor against liability for the same and holding the Premises free from the effect of such lien or claim. In addition, Lessor may require Lessee to pay Lessor's attorney fees and costs in participating in such action. If Lessor shall decide it is in its best interest to do so.

(d) Unless Lessor requires their removal, as set forth in Paragraph 7.5(a), all alterations, improvements, additions and utility installations (whether or not such utility installations constitute trade fixtures of Lessee), which may be made on the Premises, shall become the property of Lessor and remain upon and be surrendered with the Premises at the expiration of the term. Notwithstanding the provisions of this Paragraph 7, Lessee's machinery and equipment, other than that which is affixed to the Premises so that it cannot be removed without material damage to the Premises, shall remain the property of Lessee and may be removed by Lessee subject to the provisions of Paragraph 7.2.

B. Insurance Indemnity.

B.1 Insuring Party. As used in this Paragraph B, the term "insuring party" shall mean the party who has the obligation to obtain the fire insurance required hereunder. The insuring party shall be designated in Paragraph 18.28 hereof. Whether the insuring party is the Lessor or Lessee, Lessee shall, as additional rent for the Premises, pay the cost of all insurance required hereunder, if Lessor is the insuring party Lessee shall, within ten (10) days following demand by Lessor, reimburse Lessor for the cost of the insurance so obtained.

B.2 Liability Insurance. Lessee shall, at Lessee's expense obtain and keep in force during the term of this Lease a policy of Combined \$1,000,000 Bodily Injury and Property Damage Insurance insuring Lessee and Lessee against any liability arising out of the ownership, use, occupancy, maintenance of the Premises and all these operations thereto. Such insurance shall be a combined single limit policy in an amount not less than \$500,000. The policy shall contain cross liability endorsements and shall insure performance by Lessee of the indemnity provisions of this Paragraph B. The limits of said insurance shall not, however, limit the liability of Lessee hereunder. In the event that the Premises constitute a part of a property said insurance shall have a Lessor's Protective Liability endorsement attached thereto. If Lessee shall fail to procure and maintain insurance Lessor may, but shall not be required to procure and maintain the same, but at the expense of Lessee. Not more frequently than at years, if, in the reasonable opinion of Lessor, the amount of liability insurance required hereunder is not adequate, Lessee shall increase insurance coverage as required by Lessor. Provided, however that in no event shall the amount of the liability insurance increase be more than percent greater than the amount thereof during the preceding years of the term of this lease. However, the failure of Lessor to require additional insurance coverage shall not be deemed to release Lessee from any obligations under this Lease.

B.3 Property Insurance.

(a) The insuring party shall obtain and keep in force during the term of this Lease a policy or policies of insurance covering loss or damage to the Premises, in the amount of the full replacement value thereof, or the same may exist from time to time, which replacement value is \$1,000,000.

(b) In no event less than the total amount of promissory notes secured by liens on the Premises as of the date included within the classification of fire, extended coverage, vandalism, malicious mischief, special extended perils (all risk) and earthquake. Said insurance shall provide for payment of loss thereunder to Lessor or to the holder of mortgages or deeds of trust on the Premises. Insuring party shall, in addition, obtain and keep in force during the term of this Lease a policy of rental income insurance covering a period of months, which insurance shall also cover all real estate taxes and insurance costs for said period. If the insuring party shall fail to procure maintain said insurance the other party may, but shall not be required to, procure and maintain the same, but at the expense of Lessee. If insurance coverage has a deductible clause, Lessee shall be liable for the deductible amount.

(c) If the Premises are part of a larger building or if the Premises are part of a building owned by Lessor and Lessee shall not be required to insure the Premises for loss or damage to the property insurance of such other building or buildings if such insurance is maintained by Lessor or the insuring party of the Premises.

(d) If the Lessor is the insuring party the Lessor will not insure Lessee's fixtures, equipment or tenant improvements, unless the improvements have become a part of the Premises under Paragraph 7, hereof. But if Lessee is the insuring party the Lessee shall insure its fixtures, equipment and tenant improvements.

(e) Not more frequently than each three years, if the amount of property insurance required hereunder is not adequate, the insuring party shall increase said insurance coverage as required by Lessor. However, such increase may be more frequent than three years if required by the insurance carrier in order to maintain insurance for the full replacement value of the Premises.

B.4 Insurance Policies. Insurance required hereunder shall be in companies holding a "General Policyholder Rating" of A plus or better as set forth in the most current issue of "Best's Insurance Guide". The insuring party shall deliver to the other party copies of policies of such insurance certificates evidencing the existence and amount of such insurance with loss payable clauses satisfactory to Lessor. No such policy shall be cancellable or subject to reduction of coverage or other modification except after ten (10) days prior written notice to Lessor. If Lessee is the insuring party, Lessee shall, within ten (10) days prior to the expiration of such policies, furnish Lessor with renewal of "binders" thereof, or Lessor may, at its option, insure and charge the cost thereof to Lessee, which amount shall be payable by Lessee upon demand. Lessee shall not do or permit anyone to do anything which shall invalidate the insurance policies referred to in Paragraph B.3, if Lessee does or permits to be done anything which increases the cost of the insurance policies referred to in Paragraph B.3, then Lessee shall forthwith upon Lessor's demand reimburse Lessor to additional premiums attributable to any act or omission or operation of Lessee causing such increase in the cost of insurance. If Lessor is the insuring party, and if the insurance policies maintained hereunder cover other improvements in addition to the Premises, Lessor shall obtain Lessee's written statement setting forth the amount of any such insurance cost increase and showing in reasonable detail the manner in which the same has been computed.

B.5 Waiver of Subrogation. Lessee and Lessor each hereby waive any and all rights of recovery against the other, or against the employees, agents and representatives of the other, for loss or damage to such waiving party or its property or the property of others and control to the extent that such loss or damage is insured against under an insurance policy in force at the time of such loss or damage. The insuring party shall, upon obtaining the policies of insurance required hereunder, give notice to the insurance carrier or carriers that the foregoing in waiver of subrogation is contained in this Lease.

B.6 Indemnity. Lessor shall indemnify and hold harmless Lessor from and against any and all claims arising from or out of the use of the Premises or from the conduct of Lessee's business or from any activity work or things done, permitted or suffered by Lessee in or about the Premises, and shall further indemnify and hold harmless Lessor from and against any and all claims arising from any breach or default performance of any obligation on Lessee's part to be performed under the terms of this Lease, or arising from any negligence or the Lessor, or Lessee's agents, contractors or employees, and from and against all costs, attorney's fees, expenses and handling charges in the defense of such claim or any action or proceeding brought thereon, and in this action or proceeding as brought by the Lessor, or by action of

claim. Lessee upon notice from Lessor and defend the name of Lessee a license by Counsel satisfaction to Lessor. Lessee in a matter or do no consideration on Lessor. hereby assumes risk of damage to property or injury to persons in, upon or about the Premises arising from any of and Lessee heretofore or hereinafter in respect thereof against Lessor.

4.7 Exemption of Lessor from Liability. Lessee hereby agrees that Lessor shall not be liable for injury to Lessee's business or any loss incurred herefrom or for damage to the goods, ware, materials, contents or other property of Lessee, Lessee's employees, invitees, customers, or other person in or about the Premises, nor shall Lessor be liable for injury to the person or property of Lessee's employees, invitees, customers, or other person if such damage or injury is caused by or results from the steam, electricity, gas, water, or fumes or from fire, lightning, or leakage, obstructions, inlet defects of pipes, sprinklers, wires, appliances, plumbing, or conditioning or lighting fixtures, or from any other cause, whether the damage or injury results from conditions existing upon the Premises or upon other portions of the building of which the Premises are a part, or other sources or places, and regardless of whether the cause of such damage or injury or the means of remedying the same is successful or not. Lessor shall not be liable for any damage arising from any and all aspects of any other tenant, if any, of the building in which the Premises are located.

6. Damage, Destruction, Obligation to Rebuild, Rent Abatement.

g.1. Deduction to Be Build. In the event that some or all of the improvements constituting a part of the Premises or the Premises itself damaged or destroyed, partially or totally from any cause whatsoever, whether or not such damage or destruction is caused by any third party, shall be maintained under Paragraph 6.3 hereof, then Lessee shall repair, restore and rebuild the Premises to its condition existing immediately prior to such damage or destruction and this Lessee shall remain in full force and effect. Such repair, restoration and rebuilding is required when there is called (repair) shall be commenced within a reasonable time after such damage or destruction has occurred and shall be done as soon as completion.

9.2 Insurance Proceeds. The proceeds of any insurance maintained under Paragraph 8.3 hereof shall be made available to Lessee payment of costs and expense of repair, provided however, that such proceeds may be made available to Lessee subject to reasonable conditions. Including, but not limited to architect's selection of material, retention of a percentage of such proceeds pending completion of a notice of completion and a lien and conviction bond to insure against material or workmanship defects, and to insure completion of the repair at the expense of Lessee. In the event the insurance proceeds are insufficient to cover the cost of repair, Lessee shall have the right of first refusal to purchase the insurance proceeds received (or are required to complete said repair) shall be paid by Lessee. In the event the insurance proceeds are made available to Lessee within 120 days after such damage or destruction, unless the amount of insurance coverage is in dispute with the insurer, Lessee shall have the option for 30 days commencing on the expiration of such 120 day period, of cancelling this Lease. If Lessee exercises such option, Lessee shall have no further obligation hereunder and shall have no claim against Lessor. Lessee, in order to exercise its option, shall exercise said option by giving written notice to Lessor within said 30 day period, time being of the essence.

9.3 **Damage Near End of Term.** If the Premises are partially destroyed or damaged during the last six months of the term of this Lease, Lessor may at Lessor's option cancel and terminate this Lease as of the date of occurrence of such damage by giving written notice to Lessee of Lessee election to do so within 30 days after the date of occurrence of such damage.

9.4 Abatement of Rent. Notwithstanding the perils or total destruction of the Premises and any part thereof and notwithstanding whether casualty is insured or not, there shall be no abatement of rent or of any other obligation of Lessee hereunder by reason of such damage, destruction unless the Lessee is terminated by virtue of other express terms of this Lease.

9.5 **Termination - Advance Payments.** Upon termination of this Lease pursuant to this Paragraph 9, an equitable adjustment shall be made concerning advance rent and any advance payments made by Lessee to Lessor. Lessor shall, in addition, return to Lessee so much of the security deposit as has not theretofore been applied by Lessor.

9.4. WELVER, Lessee, waives the provisions of California Civil Code Sections 1932 (2) and 1932 (4) which relate to termination of lease when thing leased is destroyed and agrees that such event shall be governed by the terms of this Lease.

18. Real Property Taxes.

10.3 Payment of Taxes. Lessee shall pay all real property taxes applicable to the Premises during the term of this Lease. All such payments shall be made at least ten (10) days prior to the delinquency date of such payment. Lessee shall promptly furnish Lessor with satisfactory evidence that such taxes have been paid. If any such taxes paid by Lessee shall cover any period of time prior to or after the expiration of the term hereof, Lessee's share of such taxes shall be equitably prorated to cover only the period of time within the lease term year during which this Lease shall be in effect, and Lessor shall reimburse Lessee to the extent required. If Lessee shall fail to pay any such taxes, Lessor shall have the right to pay the same in which case Lessee shall repay such amount to Lessor with Lessee's next rent installment together with interest at the rate of 16% per annum.

102 Definition of "Real Property" Tax. As used herein, the term "real property tax" shall include any form of assessment, license, commercial rent, fee, penalty, or tax (other than inheritance or estate taxes), imposed by any authority having the direct or indirect power, including any city, county, state or federal government, or any school, agricultural, lighting, drainage or other improvement district thereof against any legal or equitable interest in Lessor in the Premises or in the real property of which the Premises are a part, as against Lessor's right or other income therefrom, or as against Lessor's business of leasing the Premises or any tax imposed in substitution, entirety or totality, of tax previously included within the definition of real property tax, or any additional tax the nature of which was previously included within the definition of real property tax.

10.3 Joint Assessment. If the Premises are not separately assessed, Lessee's liability shall be an equitable proportion of the real property is for all of the land and improvements included within the tax parcel assessed, such proportion to be determined by Lessor from the respective valuations assigned in the assessor's work sheets or such other information as may be reasonably available. Lessor's reasonable determination, in good faith, shall be conclusive.

10.4 Personnel Properly Trained.

(e) Lessee shall pay prior to delinquency all taxes assessed against and levied upon trade fixtures, furnishings, equipment and all other personal property of Lessee contained in the Premises or elsewhere. When possible, Lessee shall cause said trade fixtures, furnishings, equipment and all other personal property to be assessed and billed separately from the real property of Lessor.

(b) If any of Lessee's sold personal property shall be assessed with Lessee's real property, Lessee shall pay Lessor the taxes attributable Lessee within 10 days after receipt of a written statement setting forth the taxes applicable to Lessee's property.

11. Viruses

Lessee shall pay for all water, gas, heat, light, power, telephone and other utilities and services supplied to the Premises, together with any late charges. If any such services are not separately metered to Lessee, Lessee shall pay a reasonable proportion to be determined by Lessor or their agents jointly metered with other premises.

Assignment and Grading

12.1 ~~Transfer of Lessor's Interest~~ Consent Required Lessor shall not voluntarily or by operation of law assign, transfer, mortgage, sublet or otherwise ~~make~~ transfer all or any part of Lessor's interest in this Lease or in the Premises, without Lessor's prior written consent, which Lessor shall unreasonably withhold. Any attempted assignment, transfer, mortgage, encumbrance or subletting ~~in violation of this section~~ shall be void, and constitute a breach of this Lease.

12.2 Lessee AMIlets. Notwithstanding the provisions of Paragraph 12.1 hereof, Lessee may assign or sublet the Premises, or any part thereof, without Lessor's consent, to any corporation which is controlled by, or under common control with Lessee, or to any corporation resulting from the merger or consolidation of Lessee, or to any person or entity which acquires all or a portion of the assets of Lessee as a going concern of business that is being conducted at the Premises, provided that said assignee assumes, in full, the obligations of Lessee under this Lease. Any assignment, sublease or in any way, effect or limit the liability of Lessee under the terms of this Lease even, if after such act of assignment or subletting, the terms of the Lease are materially changed or altered without the consent of Lessee, the consent of whom shall not be necessary.

12.3 ~~Notwithstanding to whomsoever the lease hereunder is assigned, the obligation of Lessee to pay the rent and to perform all other obligations to be performed by Lessee hereunder shall not be deemed to be waived by Lessor or any person hereof. The acceptance of rent by Lessor or any person hereof shall not constitute an assumption of the obligations of Lessee hereunder. In the event of default by Lessee or any successor of Lessee, Lessor may proceed directly against Lessee without the necessity of exhausting remedies against any assignee of Lessee.~~

12. Deletion Remedy.

12.1 Defaults. The occurrence of any one or more of the following events shall constitute a material default and breach of this Lease by Lessee:

(a) The vacating or abandonment of the Premises by Lessee.

(b) The failure by Lessee to make any payment of rent or any other payment required to be made by Lessee hereunder, as and when due, shall constitute a default by Lessee, and, in the event of such default, Lessor shall have the right to terminate this lease and to re-lease the premises to any third party, and Lessee shall be liable to Lessor for all costs and expenses, including reasonable attorneys' fees, incurred by Lessor in connection with such termination and re-leasing.

(c) The failure by Lessee to observe or perform any of the covenants, conditions or provisions of this Lease to be observed or performed by Lessee, other than described in paragraph (b) above, where such failure shall continue for a period of 30 days after written notice thereof from Lessor to Lessee, provided however, that the nature of Lessee's default is such that more than 30 days are reasonably required for its cure, then Lessee shall not be deemed to be in default if Lessee commences such cure within said 30-day period and thereafter diligently pursues such cure to completion.

1d(f). The making by Lessee of any general assignment or other arrangement for the benefit of creditors in the time of or against the date of a petition to have Lessee adjudged a bankrupt or a petition for reorganization or assignment under any law relating to bankruptcies (whether or not a petition filed against Lessee) the same is omitted within 60 days; and the appointment of a trustee or receiver to take possession of, administer or liquidate all of Lessee's assets located at the Premises or of Lessee's interest in the Lease, while continuously controlled by Lessee within sixty (60) days of the attachment, execution or other judicial seizure of substantially all of Lessee's assets located at the Premises or of Lessee's interest in the Lease, where each acture is not disclosed within 30 days

(b) The discovery by Lessor that any financial statement given to Lessor by Lessee, the disclosure of Lessee, any succession of Lessee, or any guarantor of Lessee's obligations hereunder, and any of them, is materially false.

13.2 Remedies. In the event of any such material default or breach by Lessee, Lessor may at any time thereafter, with or without notice demand and without limiting Lessor's exercise of any right or remedy which Lessor may have by reason of such default or breach.

(a) Terminate Lessee's right to possession of the Premises by any lawful means, in which case the Lessee shall terminate and Lessee shall immediately surrender possession of the Premises to Lessor. In such event Lessor shall be entitled to recover from Lessee all damages incurred by Lessor by reason of Lessee's default including, but not limited to, the cost of recovering possession of the Premises, expenses of retaining, including necessary renovation and alteration of the Premises, reasonable attorney's fees and any real estate commission actually paid, the worth of the lease or the court having jurisdiction thereof of the amount by which the unpaid rent for the balance of the term after the time of such default exceeds the amount of such rental loss for the same period that Lessee proves could be reasonably avoided, the portion of the lease commission paid by Lessor pursuant to Paragraph 15 applicable to the unexpired term of this Lease.

(b) Maintain Lessee's right to possession in which case this Lease shall continue in effect whether or not Lessee shall have abandoned the Premises. In such event Lessor shall be entitled to enforce all of Lessor's rights and remedies under this Lease, including the right to recover the rent if it becomes due hereunder.

(c) Pursue any other remedy now or hereafter available to Lessor under the laws or judicial decisions of the State in which the Premises is located.

13.3 Default by Lessor. Lessor shall not be in default unless Lessor fails to perform obligations required of Lessor within a reasonable time. In no event later than thirty (30) days after written notice by Lessee to Lessor and to the holder of any first mortgage or deed of trust covering Premises whose name and address shall have theretofore been furnished to Lessee in writing, specifying wherein Lessor has failed to perform its obligations provided, however, that if the nature of Lessor's obligation is such that more than thirty (30) days are required for performance, Lessor shall not be in default if Lessor commences performance within such 30-day period and thereafter diligently prosecutes the same to completion.

13.4 Late Charges. Lessee hereby acknowledged that late payment by Lessee to Lessor of rent and other sums due hereunder will cause Lessor to incur costs not contemplated by this Lease, the exact amount of which will be extremely difficult to ascertain. Such costs include, but are not limited to, processing and accounting charges, and late charges which may be imposed on Lessor by the terms of any mortgage or deed of trust covering the Premises. Lessor shall be entitled to recover from Lessee the amount of such costs and charges, including reasonable attorney's fees and any real estate commission actually paid, the worth of the lease or the court having jurisdiction thereof of the amount by which the unpaid rent for the balance of the term after the time of such default exceeds the amount of such rental loss for the same period that Lessee proves could be reasonably avoided, the portion of the lease commission paid by Lessor pursuant to Paragraph 15 applicable to the unexpired term of this Lease.

14. Condemnation. If the Premises or any portion thereof are taken under the power of eminent domain, or sold under the threat of the exercise of such power (all of which are herein called "condemnation"), this Lease shall terminate as to the part so taken as of the date the condemning authority takes title of possession, whichever first occurs. If more than 10% of the floor area of the improvements on the Premises, or more than 25% of the land area of the Premises which is not occupied by any improvements, is taken by condemnation, Lessee may, at Lessee's option, to be exercised within only within ten (10) days after Lessor shall have given Lessee written notice of such taking for in the absence of such notice, within ten (10) days after the condemning authority shall have taken possession) terminate this Lease as of the date the condemning authority takes title of possession. If Lessee does not terminate this Lease in accordance with the foregoing, this Lease shall remain in full force and effect as to the part of the Premises remaining, except that the rent shall be reduced in the proportion that the floor area taken bears to the total floor area of the building situated on the Premises. Any award for the taking of all or any part of the Premises under the power of eminent domain or of any payment made under threat of the exercise of such power shall be the property of Lessor, whether such award shall be made as compensation for diminution in value of the leasehold or for the taking of the fee, or as severance damages; provided, however, that Lessee shall be entitled to any award for loss of or damage to Lessee's trade fixtures and removable personal property. In the event that this Lease is not terminated by reason of such condemnation, Lessor shall, to the extent of severance damages received by Lessor in connection with such condemnation, repay any damage to the Premises caused by such condemnation except to the extent that Lessee has been reimbursed therefor by the condemning authority. Lessee shall pay amount in excess of such severance damages required to complete such repair.

15. Brokerage Fee. Upon execution of this lease by both parties, Lessor shall pay to the broker, a fee as set forth in a separate agreement between Lessor and said broker, or in the event there is no such agreement the sum of \$_____ for brokerage services rendered by said broker to Lessor in this transaction. Lessor further agrees that if Lessee exercises any option granted hereunder, or any option subject to this lease, either to extend the term of this lease, or to purchase said Premises or any part thereof and/or to lease said Premises, which Lessor may own or in which Lessor has an interest, any other option granted herein, or if said broker is the broker of record of any other lease or option granted to Lessee, Lessor shall pay said broker a fee in accordance with the schedule of said broker in effect at the time of execution of this Lease. Lessor agrees to pay said fee on behalf of Lessee, but also on behalf of any partnership, corporation, association, or other entity having an ownership interest in said real property or any part thereof, such fee to be paid by Lessor. Any transferee of Lessor's interest in this Lease, by accepting an assignment of such interest, shall be deemed to have agreed to pay said fee. Lessor shall not be bound by this Paragraph if said broker shall be deemed to have been paid by Lessor.

16. General Provisions.

16.1. Estoppel Certificate. (a) Lessee shall at any time upon not less than ten (10) days prior written notice from Lessor execute, acknowledge and deliver to Lessor a statement in writing (i) certifying that this Lease is unmodified and in full force and effect (or, if modified, stating the nature of such modification, certifying that this Lease, as so modified, is in full force and effect) and the date to which the rent and other charges are paid in advance, if any; (ii) acknowledging that there are no, to Lessee's knowledge, any uncured defaults on the part of Lessor hereunder, or specifying such defaults if they are claimed. Any such statement may be conclusively relied upon by any prospective purchaser or encumbrancer of the Premises. (b) Lessee's failure to deliver such statement within such time shall be conclusive upon Lessee (i) that this Lease is in full force and effect without modification except as may be represented by Lessor, (ii) that there are no uncured defaults in Lessor's performance, and (iii) that not more than one month's rent has been paid in advance or such failure may be considered by Lessor as a default by Lessee under this Lease. (c) If Lessor desires to finance or refinance the Premises, or any part thereof, Lessee hereby agrees to deliver to any lender designating Lessor such financial statements of Lessee as may be reasonably required by such lender. Such statements shall include the past history of financial statements of Lessee. All such financial statements shall be received in confidence and shall be used only for the purpose herein set forth.

16.2. Lessor's Liability. The term "Lessor" as used herein shall mean only the owner or owners at the time in question of the fee title or a leasehold interest in a ground lease of the Premises, and except as expressly provided in Paragraph 15, in the event of any transfer of such title or interest, Lessor herein named (and in case of any subsequent transfers the then grantor) shall be relieved from and after the date of such transfer of liability as respects Lessor's obligations hereunder to be performed, provided that any lender in the hands of Lessor or the then grantor of the lease, in which Lessee has an interest, shall be delivered to the grantee. The obligations contained in this Lease to be performed by Lessee, subject as aforesaid, be binding on Lessor's successors and assigns, only during their respective periods of ownership.

16.3. Severability. The invalidity of any provision of this Lease as determined by a court of competent jurisdiction, shall in no way affect the validity of any other provision hereof.

16.4. Interest on Past-due Obligations. Except as expressly herein provided, any amount due Lessor not paid when due shall bear interest at 10% per annum from the date due. Payment of such interest shall not excuse or cure any default by Lessee under this Lease; provided, however, interest shall not be payable on late charges incurred by Lessee nor on any amounts upon which late charges are paid by Lessee.

16.5. Time of Essence. Time is of the essence.

16.6. Capable. Article and paragraph captions are not a part hereof.

16.7. Incorporation of Prior Agreements; Amendments. This Lease contains all agreements of the parties with respect to any matter mentioned herein. No prior agreement or understanding pertaining to any such matter shall be effective. This Lease may be modified in writing only, signed by the parties in interest at the time of the modification. Except as otherwise stated in this Lease, Lessee hereby acknowledges that neither the estate broker hired in Paragraph 15 hereof nor any cooperating broker on this transaction nor the Lessor or any employee or agent of any other persons has made any oral or written warranties or representations to Lessee relative to the condition or use of said Premises and Lessee acknowledges that Lessee assumes all responsibility regarding the Occupational Safety Health Act or the legitimacy of adaptability of the Premises and the compliance thereof to all applicable laws and regulations enforced during the term of this Lease except as otherwise specifically stated in this Lease.

16.8. Notices. Any notice required or permitted to be given hereunder shall be in writing and may be given by personal delivery or by certified mail, and if given personally or by mail, shall be deemed sufficiently given if addressed to Lessee or to Lessor at the address noted below, signature of the respective parties, as the case may be. Either party may by notice to the other specify a different address for notice purposes. After Lessee's taking possession of the Premises, the Premises shall constitute Lessee's address for notice purposes. A copy of any notice required or permitted to be given to Lessor hereunder shall be concurrently transmitted to such party or parties at such addresses as Lessor from time to time hereafter designates by notice to Lessee. See ADDENDUM, Paragraph 20.

16.9. Waiver. No waiver by Lessor of any provision hereof shall be deemed a waiver of any other provision hereof or of any subsequent breach by Lessee of the same or any other provision. Lessor's consent to or approval of any act shall not be deemed to render unnecessary the obtaining of Lessor's consent to or approval of any subsequent act by Lessee. The acceptance of rent hereunder by Lessor shall not be a waiver of any other breach by Lessee of any provision hereof, other than the failure of Lessee to pay the particular rent so accepted; repudiation by Lessee of any such preceding breach at the time of acceptance of such rent.

16.10. Recording. Lessor shall cause this Lease to be recorded in the public records of the County of _____, State of _____, within thirty (30) days of the date of execution of this Lease. Either party shall, upon request of the other, execute, acknowledge and deliver to the other a short form memorandum of this Lease for recording purposes.

16.11. Holding Over. If Lessee remains in possession of the Premises or any part thereof after the expiration of the term hereof without payment of the rent or other charges, Lessor shall be deemed to have consented to or approved of any act by Lessee to extend the term of this Lease, and Lessee shall be deemed to have agreed to pay the rent and other charges payable hereunder, and upon the terms hereof applicable to a month-to-month tenancy.

16.12. Cumulative Remedies. No remedy or election hereunder shall be deemed exclusive but shall, whenever possible, be cumulative and not mutually exclusive.

16.13 Covenants and Conditions. Each provision of this Lease enforceable by Lessee shall be deemed both a covenant and a condition.
16.14 Binding Effect: Choice of Law. Subject to any provisions hereof restricting assignment or subletting by Lessee and subject to the provisions of Paragraph 16.2, this Lease shall bind the parties, their personal representatives, successors and assigns. This Lease shall be governed by the laws of the State in which the Premises are located.

16.15 Subordination.

(a) This Lease, at Lessor's option, shall be subordinate to any ground lease, mortgage, deed of trust or any other hypothecation for security now or hereafter placed upon the real property of which the Premises are a part and to any and all advances made on the security thereof and to all renewals, modifications, extensions, replacements and extensions thereof. Notwithstanding such subordination, Lessee's right to quiet possession of the Premises shall not be disturbed if Lessee is not in default and so long as Lessee shall pay the rent and observe and perform all the provisions of this Lease, unless the Lease is otherwise terminated pursuant to its terms. If any mortgage, trust or ground lease shall exist to have this Lease prior to the lien of its mortgage, deed of trust or ground lease, and shall give written notice thereof to Lessee, this Lease shall be deemed prior to such mortgage, deed of trust or ground lease, whether this Lease is dated prior or subsequent to the date of said mortgage, deed of trust or ground lease or the date of recording thereof.

(b) Lessee agrees to execute any documents required to effectuate such subordination or to make this Lease prior to the lien of any mortgage, deed of trust or ground lease, as the case may be, and failing to do so within ten (10) days after written demand, does hereby make, constitute and ratify each of Lessor as Lessee's attorney in fact and in Lessee's name, place and stead, to do so.

16.16 Attorney's Fees. Neither party or the broker named herein brings an action to enforce the terms hereof or declare rights hereunder, the prevailing party in any such action, on trial or appeal, shall be entitled to his reasonable attorney's fees to be paid by the losing party as fixed by the court. The provisions of this paragraph shall inure to the benefit of the broker named herein and shall be enforceable as a right hereunder.

16.17 Lessor's Access. Lessor and Lessor's agents shall have the right to enter the Premises at reasonable times for the purposes of inspecting the same, showing the same to prospective purchasers, or lenders, or lessees, and making such alterations, repairs, improvements or additions to the Premises or to the building of which they are a part as Lessor may deem necessary or desirable. Lessor may at any time place on or about the Premises any ordinary "For Sale" signs and Lessor may at any time during the last 120 days of the term hereof place on or about the Premises any ordinary "For Lease" signs, all without rebate of rent or liability to Lessee.

16.18 Signs and Auctions. Lessee shall not place any sign upon the Premises or conduct any auction thereon without Lessor's prior written consent except that Lessee shall have the right, without the prior permission of Lessor to place ordinary and usual for rent or sublet signs thereon.

16.19 Merger. The voluntary or other surrender of this Lease by Lessee, or a mutual cancellation thereof, or termination by Lessor, shall not work a merger, and shall, at the option of Lessor, terminate all or any existing subtenancies or may, at the option of Lessor, operate as an assignment to Lessor of any or all of such subtenancies.

16.20 Corporate Authority. If Lessee is a corporation, each individual executing this Lease on behalf of said corporation represents and warrants that he is duly authorized to execute and deliver this Lease on behalf of said corporation, in accordance with a duly adopted resolution of the Board of Directors of said corporation or in accordance with the Bylaws of said corporation, and that this Lease is binding upon said corporation in accordance with its terms. If Lessee is a corporation Lessee shall, within thirty (30) days after execution of this Lease, deliver to Lessor a certified copy of a resolution of the Board of Directors of said corporation authorizing or ratifying the execution of this Lease.

16.21 Consents. Wherever in this Lease the consent of one party is required to an act of the other party such consent shall not be unreasonably withheld.

16.22 Guarantor. In the event that there is a guarantor of this Lease, said guarantor shall have the same obligations as Lessee under Paragraphs 16.1 and 16.20 of this Lease.

16.23 Quiet Possession. Upon Lessee paying the fixed rent reserved hereunder and observing and performing all of the covenants, conditions and provisions on Lessee's part to be observed and performed hereunder, Lessee shall have quiet possession of the Premises for the entire term hereof subject to all of the provisions of this Lease.

16.24 Quiet Possession. Upon Lessee paying the fixed rent reserved hereunder and observing and performing all of the covenants, conditions and provisions on Lessee's part to be observed and performed hereunder, Lessee shall have quiet possession of the Premises for the entire term hereof subject to all of the provisions of this Lease.

16.25 Multiple Tenant Building Rules and Regulations. In the event that the Premises are part of a larger building or group of buildings then Lessee agrees that it will abide by, keep and observe all reasonable rules and regulations which Lessor may make from time to time for the management, safety, care, and cleanliness of the building and grounds, the parking of vehicles and the preservation of good order therein as well as for the convenience of other occupants and tenants of the building. Further, Lessee will promptly pay its pro rata share, as reasonably determined by Lessor, of any maintenance or repair of such portion of the Premises or such portion of the property of which the Premises are a part, which are common areas or used by Lessee and other occupants thereof. The violations of any such rules and regulations, or the failure to pay such pro rata share of costs, shall be deemed a material breach of this Lease by Lessee.

16.26 Insuring Party. The insuring party under this lease shall be the Lessee

16.27 Additional Provisions. If there are no additional provisions draw a line from this point to the next printed word after the space left here. If there are additional provisions place the same here.

The parties hereto have executed this Lease at the place and on the dates specified immediately adjacent to their respective signatures.

If this Lease has been filled in it has been prepared for submission to your attorney for his approval. He represents that he has reviewed the same and that the same is in accordance with the legal sufficiency, legal effect, or the consequences of this Lease or the transaction relating thereto.

Executed at _____
on _____
Address _____

Irving Berkin

X X X X

Ralph Woodhouse

X X X X

Executed at _____
on _____
Address 670 KAYTOR

165308710 Corporate Seal
Mercury Aerospace Fasteners, Inc.
a California corporation

By _____

THIS IS AN ADDENDUM TO THE FOLLOWING LEASE:

Dated for reference purposes only:

Lessor: IRVING BERKEN and RALPH WOODHOUSE

Lessee: MERCURY AEROSPACE FASTENERS, INC., a California corporation

For the premises commonly known as 11800 Sherman Way
North Hollywood, California

17. Lessee is given the Option to extend the term of this Lease for two (2) successive 5-year periods each, as follows, but otherwise on the same terms, covenants and conditions herein.

17.1 Lessee shall give Lessor notice of exercise of each Option at least six (6) months before the expiration of the original term, or of the first extended Option Term, as applicable.

17.2 The rental during each of the two extended Option Terms shall be determined as set forth in Paragraph 18 below.

17.3 The Options to extend are not personal to Lessee and may be assigned or otherwise transferred.

18. The monthly rental for the 61st through the 120th month of the original 10-year term of this Lease, and the monthly rental during each of the two successive 5-year Option Extended Terms of this Lease shall be set as follows:

18.1 If the parties agree on the monthly rental for the applicable term at least 120 days prior to the commencement of the applicable term, they shall immediately execute an amendment to this Lease stating the monthly rent during the applicable term (to wit, for the 61st through the 120th month of the original term, or the first or second extended Option Term, as the case may be). If the parties do not agree or do not execute such amendment to this Lease at least 120 days before the commencement of the applicable term, as provided hereinabove in this Paragraph, then the monthly rent for the applicable term shall be set in the manner provided in Paragraph 18.2 below.

18.2 On or before the 100th day prior to commencement of the applicable term, Lessor and Lessee shall each appoint an appraiser and give written notice of the name and address of such appraiser to the other party to this Lease. The two appraisers thus appointed shall within twenty (20) days after the appointment of the last of the two appraisers to be appointed, appoint a third appraiser and serve written notice of the name and address of such appraiser on Lessor and Lessee in the manner prescribed by this Lease for service of notice on each party to the Lease. If a party to this Lease does not appoint an appraiser within ten (10) days after the other party has given notice of the appraiser, the single appraiser appointed shall be the sole appraiser and shall set the monthly rent for the extended period. If the two appraisers are appointed by the parties as stated herein, they shall meet and attempt to set the monthly rent for the applicable term based upon the market value and the use of the premises specified in this Lease in the County where the premises are located. If the two appraisers are unable to agree within thirty (30) days after the-

second appraiser has been appointed, they shall select a third appraiser within ten (10) days after the last day the two appraisers are given to set the monthly rent for the applicable period. If they are unable to agree on the third appraiser, then either of the parties may have the monthly rent for the applicable term set by arbitration in accordance with the rules of the American Arbitration Association at Los Angeles, California. Within thirty (30) days after the select of the second appraiser, the appraised value shall be agreed upon in writing by any two of the three appointed appraisers. If a majority of the appraisers are unable to set the monthly rental within the stipulated period of time, the three appraisals shall be added together and their total divided by three; the resulting quotient shall be the monthly rent for the applicable period and shall be binding upon the Lessor and Lessee. If, however, the low appraisal and/or the high appraisal are/is more than fifteen percent (15%) lower and/or higher than the middle appraisal, the low appraisal and/or the high appraisal shall be disregarded. If only one appraisal is disregarded, the remaining two appraisals shall be added together and their total divided by two; the resulting quotient shall be the monthly rental for the applicable term. If both the low and the high appraisals are disregarded as stated in this paragraph, the middle appraisal shall be the monthly rental for the applicable period. Lessor and Lessee shall each pay the fee and all expenses incurred by the appraiser appointed by each of them, and one-half (1/2) of all expenses and the fee incurred by the third appraiser appointed hereunder; and one-half (1/2) of the American Arbitration Association fees and expenses, if any. After the applicable monthly rent has been set, the appraisers shall immediately notify the parties. If Lessee objects to the monthly rent that has been set for the first Option Extended Term, Lessee shall have the right to have this Lease expire at the end of the original 10-year term; and similarly, if Lessee objects to the monthly rent that has been set for the Second Option Extended Term, Lessee shall have the right to have this Lease expire at the end of the First Option 5-year Extended Term; provided, that Lessee pays all costs in connection with the appraisal procedure that set the option monthly rent. Lessee's election to allow this Lease to expire as provided above must be exercised within thirty (30) days after receipt of notice of the appraised monthly rent for the applicable period. If Lessee does not exercise its said election within said 30-day period by giving written notice of said election to Lessor, the term of this Lease shall be extended as provided in this Lease.

19. Lessor and Lessee have agreed in this Lease that Lessee shall be liable for Real Property Taxes and assessments on the Premises to the extent provided herein. However, notwithstanding anything to the contrary in this Lease, the parties recognize that said Real Property Taxes and assessments may be increased because of a "change in ownership" and/or new construction, as "newly constructed" or "change in ownership" are referred to or defined in California Constitution, Article XIII A (Proposition 13 approved at the primary election held June 6, 1978) and in California legislation and Rules and Regulations pursuant thereto, now existing or as may be amended or supplemented in the future from time to time. Therefore, Lessor and Lessee further agree that in the event that the Real Property Taxes or assessments are increased on the Premises because of, or resulting from, said Article XIII A (including, but not limited to: (a) said change in ownership or said new construction; (b) a determination that a change in ownership, purchase, or new construction has occurred after March 1, 1975, and prior to March 1, 1978. ~~to a determination that Article~~

~~XIII-A of the California Constitution has been improperly applied, or (d) the enactment of subsequent Constitutional amendments, statutes or administrative rules or regulations implementing or supplementing the same subject matter as said Article XIII-A;~~ then Lessor (and Lessor's successors-in-interest, assigns, representatives and heirs), and not Lessee, shall be liable for such Real Property Taxes and assessment increase.

20. A copy of all notices to be given to Lessee hereunder must also be given to Microdot Manufacturing, Inc., at 23 Old Kings Highway South, Darien, Connecticut 06820, in the manner provided in Paragraph 16.8 of this Lease.

21. Alterations and Additions.

The following is substituted in place of subparagraph 7.5(a) which has been deleted:

(a) Lessee shall have the right to make such alterations, improvements, additions and utility installations (bus ducting, power panels, wiring, fluorescent fixtures, space heaters, conduits, air conditioning equipment and plumbing), in on or about the premises as Lessee shall deem desirable for the proper operation of Lessee's business, provided that none of such alterations, improvements, additions or installations adversely affect the structural integrity of the premises or materially reduce their value.

22. Signs.

Notwithstanding the provisions of paragraph 18.18, Lessee may maintain signs on the premises of a size and style reasonably satisfactory to Lessor.



DOCUMENT (C)

GSI ENVIRONMENTAL

16541 GOTHARD STREET, SUITE 211
HUNTINGTON BEACH, CALIFORNIA 92647
TELEPHONE: (714) 843-6866
TELEFAX: (714) 848-2407

11 September 1990

Mr. Jerome Flament
Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, CA 91609

RECEIVED
SEP 17 1990

Subject: Record search documenting a possible spill near the Mercury Aerospace Facility, North Hollywood, California.
GSI Environmental Project No. P1361.02

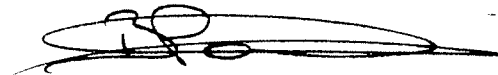
Dear Mr. Flament,

GSI Environmental contacted six regulatory agencies to obtain information regarding a possible spill near the Mercury Aerospace facility located in North Hollywood, California. The only regulatory agency who found records regarding a spill at the Mercury Aerospace facility is the County of Los Angeles Department of Health Services (LACDHS).

We have enclosed with this letter a copy of the records provided to GSI by the LACDHS. I hope this information will be valuable to you. At the present time, GSI has not reviewed nor analyzed the information contained in these records.

We would be happy to further work with you on this project. If you have any questions regarding this project or any aspect of the enclosed material, please contact me at your convenience.

Very truly yours,



Bert Palmer Ph.D., R.E.P.
Project Engineer

BP/cm
Loo4B.FLAMNT.LTR

(C)



ROBERT C. GATES, Director
COUNTY OF LOS ANGELES
DEPT. OF HEALTH SERVICES
313 North Figueroa Street
Los Angeles, CA 90012

PUBLIC HEALTH PROGRAMS AND SERVICES
Public Health Investigation
12838 Erickson Avenue, #301
Downey, CA 90242
213/940-7216

June 15, 1990

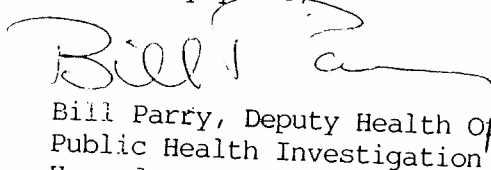
GSI Environmental
16541 Gothard Street, Suite 211
Huntington Beach, CA 92647

Attn: Patricia Bear
Office Manager

I have enclosed a certified copy of the records you requested.

An itemized statement of the fees is attached.

Sincerely yours,


Bill Parry, Deputy Health Officer
Public Health Investigation
Hazardous Materials Control Program

BP: srl



PUBLIC HEALTH PROGRAMS AND SERVICES

ROBERT C. GATES, Director
COUNTY OF LOS ANGELES
DEPT. OF HEALTH SERVICES
313 North Figueroa Street
Los Angeles, CA 90012
(213) 974-7568
FAX # (213) 250-9711

PUBLIC HEALTH INVESTIGATION
12838 Erickson Avenue, #301
Downey, CA 90242
213/940-7216

Location, Retrieval and Duplicating of Records Fee Itemized Statement

LOCATING AND RETRIEVAL OF RECORDS

1 1/2 Hours @ \$16.00 per hour (\$4.00 1/4 Hour) \$ 24.00

DUPLICATING FEE - documents 8 1/2 X 14 or less

131 pages @ \$.10 per page: \$ 13.10

DUPLICATING FEE - documents over 8 1/2 by 14 actual cost:

\$

TOTAL FEES \$ 37.10

PAID \$ 16.00

BALANCE \$ 21.10

To ensure credit to your account, please refer to file # H523/90
and make your check payable to Los Angeles Department of Health
Services.

June 15, 1990

Date

Signed

Please return copy of this notice with remittance

11/8 Mercury Aerospace Fasteners
11800 Sherman Way
N. Hollywood 91605

0305

COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES
ENVIRONMENTAL MANAGEMENT - HAZARDOUS WASTE MANAGEMENT

REPORT OF INVESTIGATION

DATE: July 23, 1984

DATE OF INVESTIGATION(S): May 21, 1984

INVESTIGATING OFFICER(S): Sr. Environmental Health Officers William Jones and Lawrence Bishop

NAME OF SUSPECT(S) / DEFENDANT(S): Microdot, Inc.; Microdot Aerospace Fastening Systems; Mercury Aerospace Fasteners; Janes Reeber, Vice President and General Manager; Art Mulloy, Plant Manager.

ADDRESS: 11800 Sherman Way, North Hollywood 91609 PHONE: (818) 982-4800

COMPANY NAME: Mercury Aerospace Fasteners PHONE: (818) 982-4800

ADDRESS 11800 Sherman Way, North Hollywood 91609 NO. OF EMPLOYEES: 111

OWNERS, PRINCIPLE STOCKHOLDERS, ETC.: Microdot, Inc., P.O. Box 3001, Fullerton California 92634-3001

BUSINESS STRUCTURE: Mercury Aerospace Fasteners, a Profit Center under Microdot Aerospace Fastening Systems Group, in the Microdot Industries Division of Microdot, Inc.

COMPANY'S ATTORNEY: Unknown

PHONE:

ADDRESS:

PRODUCT OR SERVICE PRODUCED: Aircraft Fasteners

COMPANY CONTACT PERSON: Art Mulloy, Plant Manager, (818) 982-4800; Bill Packard, Safety Security Manager, (714) 871-1550.

SEC. STATE HEALTH LAW: California Health & Safety Code, Division 20, Chapter 6.5, Section 25189.5

SEC. COUNTY ORD. NO.:

LOCATION OF VIOLATION(S): 11500 Sherman Way, North Hollywood 91609

TYPE OF VIOLATION(S): Discharge of hazardous waste to unauthorized locations off-site.

TYPE OF WASTE(S) DISCHARGED: Nitric Acid, waste oils, copper

4 LIMITS (IF APPLICABLE): N/A

ERRING AGENCY: D W P

DEFENDANTS PREVIOUS RECORD: None

PHONE: (213) 481-3170

DEFENDANTS STATEMENT: See Report

000385A

COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES
ENVIRONMENTAL MANAGEMENT - HAZARDOUS WASTE MANAGEMENT

REPORT OF INVESTIGATION

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COMPANY'S ATTORNEY: Unknown PHONE:

ADDRESS:

PRODUCT OR SERVICE PRODUCED: Aircraft Fasteners

COMPANY CONTACT PERSON: Art Mulloy, Plant Manager, (818) 982-4800; Bill
Packard, Safety Security Manager, (714) 871-1550.

SEC. STATE HEALTH LAW: California Health & Safety Code, Division 20,
Chapter 6.5, Section 25189.5

SEC. COUNTY ORD. NO.:

LOCATION OF VIOLATION(S): 11500 Sherman Way, North Hollywood 91609

BRIEF STATEMENT OF VIOLATION(S): Discharge of hazardous waste to unauthorized
locations off-site.

TYPE OF WASTE(S) DISCHARGED: Nitric Acid, waste oils, copper

AM LIMITS (IF APPLICABLE): N/A

REFERRING AGENCY: D W P PHONE: (213) 481-3170

DEFENDANTS PREVIOUS RECORD: None

DEFENDANTS STATEMENT: See Report

CHARGING SECTION

On May 21, 1984, Senior Environmental Health Officer William Jones and Industrial Hygienist Lawrence Bishop investigated a complaint of a chemical being discharged to the ground off-site from the subject facility. The following violation of the California Health and Safety Code, Division 20, Chapter 6.5, Hazardous Waste Control Law, Article 8, Section 25189.5, was observed by the investigating officers:

Section 25189.5: Representatives of Mercury Aerospace Fasteners (a Profit Center under the Microdot Industries Division of Microdot, Inc.) did knowingly and negligently permit unknown quantities of hazardous wastes (to wit: oil and nitric acid-copper waste) to be discharged onto the ground just south of the subject location onto a railroad right-of-way, and also onto the ground just west of the loading dock area.

HISTORY / SUMMARY -

On May 21, 1984, at approximately 1400 hours, an investigation was conducted by this Department in response to a complaint from the Los Angeles Department of Water and Power. The above mentioned officers observed a green liquid draining directly from the subject plant facility southward over a parking lot area (See Photo #1 & 2), then off-site through a chain link fence where it collected in a pooled area approximately 10' x 30' (See Photo #3). Also observed was an oil stained soil area approximately 10' x 30', west of the loading dock area with oil stains on the loading dock and on the wall leading to the ground from the loading dock area (See Photo #4).

Mr. Art Mulloy, Plant Manager, was contacted and escorted Jones and Bishop through the plant and into the rear areas. When asked how the material near the railroad tracks got there, Mr. Mulloy stated, "I don't know, I guess they dump it".

A further extensive survey of the plant operations revealed the company to be engaged primarily in machining steel to manufacture aircraft fasteners with subsequent degreasing and stripping operations. The discharged green material resulted from oversplash of the nitric acid stripping operation which would travel off the loading dock southward to the ponded location. Etching

of the concrete on the platform where work was conducted was observed as evidence of acid being discharged onto the ground (See Photo #5).

The oil discharge resulted from steel parts being drained on to the loading dock in open racks and being allowed to drain westward over the wall, onto the ground (See Photo #6). This occurred after degreasing the material with stoddard solvent.

An Official Notice of Violation #267845 was issued to Mr. Jim Reeber, Vice President and General Manager of Mercury Aerospace Fasteners to immediately discontinue further discharge of hazardous wastes to unauthorized locations. A further extensive Official Notice letter (dated May 24, 1984) was issued requiring a clean-up, to discontinue illegal transport of hazardous waste, and to properly store hazardous waste.

On July 3, 1984, clean-up was completed by Falcon Disposal Company and hazardous materials discharged to the ground was removed.

EVIDENCE

- 1) Photographs were taken on May 21, 1984, by Senior Environmental Health Officer William Jones, numbered 1 - 6;
- 2) Samples numbered IW 483-84 through IW 487-84 and IW 516-84 were taken by Senior Environmental Health Officer William Jones and Industrial Hygienist Lawrence Bishop.

L. A. COUNTY DEPARTMENT OF HEALTH SERVICES
HAZARDOUS WASTE CONTROL PROGRAM
ENFORCEMENT ACTIONS DURING THE MONTHS OF MAY - JULY, 1984

A. ONGOING ENFORCEMENT ACTIONS

- 1) Violator: Endo Custom Ski, Long Beach (Ski Manufacturer)
Incident: Disposed of barrels with laquer material.
- 2) Violator: Renu Plating Company, Los Angeles (Plating Shop)
Incident: Discharged plating waste to ground.
- 3) Violator: Sabre Industries, Burbank (Metal Fabrication)
Incident: Disposed of solvent to ground.
- 4) Violator: Doane Enterprises, Baldwin Park (Silver Recovery)
Incident: Discharged silver waste to street.
- 5) Violator: Commodity Refining Exchange, No. Hollywood (Silver Reclaimer)
Incident: Discharged cyanide to street.
- 6) Violator: Sonic Plating, Gardena (Plating Shop)
Incident: Discharged chrome and caustic to storm drain.
- 7) Violator: Aluminum Metal Finishers, Pomona (Metal Finisher)
Incident: Discharged acids to street.
- 8) Violator: Shield Chemical, El Monte
Incident: Illegal discharge / storage of hazardous waste.
- 9) Violator: Avalon Deburring, So. El Monte
Incident: Discharged caustic to the ground.
- 10) Violator: Ramada Inn, Los Angeles
Incident: Negligent CO discharge.
- 11) Violator: Control Plating, Gardena
Incident: Discharged plating wastes to the ground and flood control system.
- 12) Violator: Spectrum Chemical, Gardena
Incident: Discharged acids to the ground.
- 13) Violator: Simoa Plating, Gardena
Incident: Abandoned plating chemicals.
- 14) Violator: Neville Chemical, Santa Fe Springs
Incident: Illegal discharge to ground.
- 15) Violator: Accuride - Standard Precision, Santa Fe Springs
Incident: Illegal burial of drums with cyanide.

1101315B

A. ONGOING ENFORCEMENT ACTIONS - CONTINUED

- 16) Violator: Stankovich, Norwalk
Incident: Illegal disposal / storage of hazardous waste.
- 17) Violator: Developmental Sciences, Industry
Incident: Abandoned chemicals.
- 18) Violator: Toxo Spraydust, Santa Fe Springs
Incident: Illegal discharge of pesticides to ground.
- 19) Violator: Union Oil, Los Angeles
Incident: Discharged hazardous waste to the ground.
- 20) Violator: Mercury Aerospace, No. Hollywood
Incident: Discharged acid to ground.

B. CASES REFERRED TO CA / DA FOR PROSECUTION

- 1) Violator: Space Ordnance Systems, Canyon Country
Incident: Disposing of chemicals to the ground.
- 2) Violator: Electronics Plastics, Chatsworth (PC Board Manufacturer)
Incident: Disposed of hazardous wastes to trash.
- 3) Violator: Bumperline, Harbor City
Incident: Disposed of hazardous wastes to trash.
- 4) Violator: Optical Radiation Corporation, Azusa
Incident: Discharged plating wastes to ground.

C. CASES PREVIOUSLY REFERRED - NOT ACCEPTED FOR PROSECUTION

- 1) Violator: Andrew Jergens, Burbank
Incident: Unreported acid spill.
- 2) Violator: Garwood Industries, Montebello
Incident: Acid discharged to ground.
- 3) Violator: Crescent Oil, Montebello
Incident: Oil discharged to ground.
- 4) Violator: Concrete Safety Equipment, Inc., Los Angeles.
Incident: Discharged hazardous waste to ground.

D. LITIGATION IN PROGRESS

- 1) Violator: Life Paint Mfg., Santa Fe Springs (Paint Co.)
Incident: Disposal and unlawful storage of hazardous waste.
Status: Civil negotiations in progress.
- 2) Violator: David Limon, East Los Angeles (Barrel Reclaimer)
Incident: Transported and disposed of solvents and paints.
Status: Civil negotiations in progress.

D. LITIGATION IN PROGRESS - CONTINUED

- 3) Violator: Pacific Anchor Chemical Corp., Vernon (Chemical Mfg.)
Incident: Disposed of chemicals to trash which also caused fire.
Status: Civil negotiations in progress.
- 4) Violator: Sea Foamed Co., La Habra (Concrete Co.)
Incident: Employee disposed caustic material to canal.
Status: Trial set.
- 5) Violator: Economy Pallets, Compton (Pallet Company)
Incident: Storing deteriorating drums of acid.
Status: Civil proceedings in progress.
- 6) Violator: Mobil Smelting Company, Mojave
Incident: Illegally stored PCB waste.
Status: Trial pending.
- 7) Violator: Capri Lite Mfg., Commerce (Lite Manufacturing)
Incident: Disposed of caustic liquid and asbestos to dumpster.
Status: Pre-trial in progress.
- 8) Violator: Capri Pumping, East Los Angeles (Waste Hauler)
Incident: Discharged chemicals to ground, etc.
Status: Civil trial in progress.
- 9) Violator: A Z Decasing, Inc., Pomona (Battery Reclaimer)
Incident: Discharging lead to ground.
Status: Temporary Restraining Order in effect.
- 10) Violator: Nickel Solutions Recycling, Inc., No. Hollywood
(Nickel Reclaimer)
Incident: Discharged nickel to ground.
Status: Criminal trial continued.
- 11) Violator: Superior Chrome, Gardena
Incident: Discharged plating wastes to ground.
Status: Pre-trial in progress.

E. CASES ADJUDICATED THIS MONTH

- 1) Violator: Swedish Hand Laundry, Los Angeles (Dry Cleaner)
Incident: Disposed perchloroethylene and trichloroethylene to ground.
Status: Plead Guilty / Defendant fined \$2,000.00.
- 2) Violator: Ted Zeller, Villa Park (Machinery Sales)
Incident: Disposed of PCB waste.
Status: Plead Guilty / Awaiting sentencing.
- 3) Violator: Park Metals, Chatsworth (Metal Salvager)
Incident: Disposed and transported PCB waste.
Status: Plead Guilty / Received 17 months County Jail, Summary Probation - 3 years.

CASES ADJUDICATED THIS MONTH - CONTINUED

- 4) Violator: Todd Pacific Shipyard, San Pedro (Shipyard Salvager)
Incident: Unlawfully sold PCB material to unauthorized persons.
Status: Appeals filed, trial postponed.
- 5) Violator: Tom Logudice Machinery Sales Company, Long Beach
Incident: Disposed of PCB waste.
Status: Plead Guilty / Fined \$5,000.00 / Community service and guest speaking services ordered.
- 6) Violator: Flynn Plating, Pacoima
Incident: Discharged of plating wastes to the ground.
Status: Pre-trial motions in progress.
- 7) Violator: AARO, Inc., Los Angeles (Battery Reclaimer)
Incident: Discharged acid to sewer.
Status: Plead Guilty / 30 days in jail.

COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES
ENVIRONMENTAL MANAGEMENT - HAZARDOUS WASTE MANAGEMENT

REPORT OF INVESTIGATION

DATE: August 3, 1984

DATE OF INVESTIGATION(S): May 21, 1984

INVESTIGATING OFFICER(S): Sr. Environmental Health Officer William Jones
and Industrial Hygienist Lawrence Bishop

NAME OF SUSPECT(S) / DEFENDANT(S): Microdot, Inc.; Microdot Aerospace
Fastening Systems; Mercury Aerospace Fasteners; James Reeber, Vice
President and General Manager; (Art Mulloy, Plant Manager.)

ADDRESS: 11800 Sherman Way, North Hollywood 91609 PHONE: (818) 982-4800

COMPANY NAME: Mercury Aerospace Fasteners PHONE: (818) 982-4800

LOCATION OF VIOLATION(S): 11800 Sherman Way, North Hollywood 91609

NO. OF EMPLOYEES: 111 OWNERS, PRINCIPLE STOCKHOLDERS, ETC.: Microdot,
Inc., P.O. Box 3001, Fullerton, California 92634-3001

BUSINESS STRUCTURE: (Mercury Aerospace Fasteners) a Profit Center under
Microdot Aerospace Fastening Systems Group, in the Microdot Industries
Division of Microdot, Inc.

COMPANY CONTACT PERSON: Art Mulloy, Plant Manager, (818) 982-4800; Bill
Packard, Safety Security Manager, (714) 871-1550.

SEC. STATE HEALTH LAW: California Health & Safety Code, Division 20,
Chapter 6.5, Section 25189.5(b).

BRIEF STATEMENT OF VIOLATION: Discharge of hazardous waste (i.e., nitric
acid, copper, waste oils) to locations off-site (specifically, south
of loading dock onto a dirt area outside the company's perimeter fence
onto a SPRR right-of-way) which were unauthorized for the disposal of
hazardous wastes pursuant to the California Hazardous Waste Control Law.

AM LIMITS (IF APPLICABLE): Copper and copper products HLC 2500 mg/kg
Corrosivity / irritation pH less than 2.

REFERRING AGENCY: D W P

PHONE: (213) 481-3170

DEFENDANTS PREVIOUS RECORD: None

800305C

CHARGING SECTION

On May 21, 1984, the following violation of the California Health and Safety Code, Division 20, Chapter 6.5, Hazardous Waste Control Law, Article 8, Section 25189.5b was observed by the investigating officers:

Section 25189.5b: Representatives of Mercury Aerospace Fasteners (a Profit Center under the Microdot Industries Division of Microdot, Inc.) did knowingly and negligently permit unknown quantities of hazardous wastes (to wit: oil and nitric acid-copper waste) to be discharged onto the ground just south of the subject location onto a railroad right-of-way, and also onto the ground just west of the loading dock area.

HISTORY / SUMMARY

On May 21, 1984, at approximately 1400 hours, an investigation was conducted by William Jones and Lawrence Bishop of this Department in response to a complaint from the Los Angeles Department of Water and Power. The above mentioned (officers) observed a green liquid draining directly from the subject plant facility southward over a parking lot area (See Photo #1 and 2), then off-site through a chain link fence where it collected in a pooled area approximately 10' x 30' (See Photo #3). Also observed was an oil stained soil area approximately 10' x 30', west of the loading dock area with oil stains on the loading dock and on the wall leading to the ground from the loading dock area (See Photo #4).

Mr. Art Mulloy, Plant Manager, was contacted and escorted Jones and Bishop through the plant and into the rear areas. When asked how the material near the railroad tracks got there, Mr. Mulloy stated, "I don't know, I guess they dump it".

A further extensive survey of the plant operations revealed the company to be engaged primarily in machining steel to manufacture aircraft fasteners with subsequent degreasing and stripping operations. Ozzie Iarr, QC and Outside Processing Manager stated that the discharged green material resulted from oversplash of the nitric acid stripping operation which would travel

off the loading dock southward to the ponded location. Etching of the concrete on the platform where work was conducted was observed as evidence of acid being discharged onto the ground (See Photo #5).

The oil discharge resulted from steel parts being drained onto the loading dock in open racks and being allowed to drain westward over the wall, onto the ground (See Photo #6). In addition, oil stains were observed on the chain link fence and supporting poles immediately west of the dock area which indicates oil was intentionally discharged over the wall onto the adjoining Department of Water and Power ground. This occurred after degreasing the material with stoddard solvent.

An Official Notice of Violation #267845 was issued to Mr. Jim Reeber, Vice President and General Manager of Mercury Aerospace Fasteners to immediately discontinue further discharge of hazardous wastes to unauthorized locations. A further extensive Official Notice letter (dated May 24, 1984) was issued requiring a clean-up, to discontinue illegal transport of hazardous waste, and to properly store hazardous waste.

On July 3, 1984, clean-up was completed by Falcon Disposal Company and hazardous materials discharged to the ground were removed. Microdot Aerospace Fastening Systems Group assumed full responsibility for clean-up and expenses.

EVIDENCE

- 1) Photographs were taken on May 21, 1984, by Senior Environmental Health Officer William Jones, numbered 1 - 6;
- 2) Samples numbered IW 483-84 through IW 487-84 and IW 516-84 were taken by Senior Environmental Health Officer William Jones and Industrial Hygienist Lawrence Bishop.
- 3) Senior Environmental Health Officer William Jones and Industrial Hygienist Lawrence Bishop will testify to the conditions described above as observed on May 21, 1984.

SUMMARY OF SAMPLE DATA

<u>Sample #</u>	<u>Location</u>	<u>pH</u>	<u>Copper</u>	<u>Oil/Grease</u>	<u>Nitrates</u>
TW483-84	Liquid in pond, SW corner; offsite N of RR tracks (sludge)	4.1	64,500	-	4,100
TW484-84	Soil adjacent to pond; offsite at SW corner of fac	3.9	12,200	-	38,990
TW485-84	Liquid-nitric acid solu on ldg dock	0.6	4,730	-	920,000
TW486-84	Oil in open drum on ldg dock	-	-	88.8%	-
TW487-84	Soil-oil soaked area offsite W of ldg dock	8.2	5,340	12.7% 127000	1,027
TW516-84	NW corner of main bldg-in vac lot background	6.1	23.3	1150ppm	28

Copper(Cu) TILC - 2500 mg/kg (ppm); all results in ppm

Nitrates given in mg/l

COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

313 NORTH FIGUEROA STREET • LOS ANGELES, CALIFORNIA 90012

RECEIVED

JUN 20 1986

HAZARDOUS WASTE
CONTROL 620-2380

PUBLIC HEALTH PROGRAMS

RECEIVED

MAY 15 1986

Reply refer to:
2515 South Grand Avenue, Room 607
Los Angeles, CA 90007
(213) 744-3223

DATE: 4-29-86

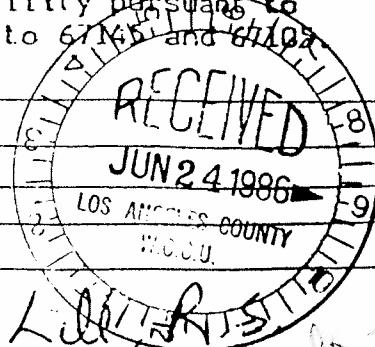
Dr. D. Roberts, Acting
Director

N. D. FINN, M.D., M.P.H.
Director

TO: Ed Early ADDRESS: 11800 Sherman Way, N. Hollywood
SUBJECT: Mercury Aerospace Fasteners ADDRESS: 91605

In order to comply with the State Health and Safety Code / California Administrative Code, you are directed to take the following actions marked below.

- 1) Discontinue immediately the disposal of hazardous wastes () to unauthorized locations ().
- 2) Discontinue immediately the transport of hazardous wastes () off site except by a registered hazardous waste hauler, under manifest and to a State Health Department permitted facility.
- 3) Remove and legally dispose by , all hazardous wastes / contaminated materials discharged to / stored at . (NOTE: All hazardous waste transported off site by vehicle must be transported under Hazardous Waste Manifest, by a State Health Department registered hauler).
- 4) Provide this office by , a site assessment and decontamination plan for the above subject contaminated area.
- 5) Provide this office by 6-28-86, a photo copy of the completed manifest receipt used to dispose of waste trichloroethane.
- 6) Store by , all hazardous waste in a secure, contained, weather proof and well posted manner pursuant to California Administrative Code, Title 22, Section 66503, 67120.
- 7) Store by , all hazardous waste in non-leaking, properly labeled and dated containers with tight fitting lids.
- 8) Discontinue the storage of hazardous waste / treatment of hazardous waste for longer than without written permission from the State Department of Health Services (213) 620-2380.
- 9) Maintain copies of all hazardous waste manifests and receipts at the above subject facility for agency review.
- 10) Obtain an EPA Number from the State Department of Health Services (213) 620-2380 or (916) 324-1781 prior to transport of any hazardous waste off site.
- 11) Provide this office by , a copy of a hazardous materials contingency plan and employee training plan for the above subject facility pursuant to California Administrative Code, Title 22, Sections 67120 to 67145 and 67102.
- 12) Additional Requirements: _____



RECEIVED BY:

U.S. Mail

INSPECTOR:

Jerry L. [Signature]

HAZARDOUS WASTE CONTROL PROGRAM

Health and Welfare Agency

Print or type. (Form designed for use on 8 1/2" (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAX 000083618		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
Generator's Name and Mailing Address MERCURY AERO SPACE 11800 SHERMAN WAY NO. HOLLYWOOD, CA. 91605 Generator's Phone () 813-982-4800						A.State Manifest Document Number 84690089							
						B.State Generator's ID CAX 000083618							
Transporter 1 Company Name SPECTRUM CHEM.SOL. & OIL						C.State Transporter's ID							
Transporter 2 Company Name						D.Transporter's Phone 714-737-7710							
Designated Facility Name and Site Address CASMALIA RESOURCES N.T.U. RD. PO BOX E CASMALIA, CA. 93429						E.State Transporter's ID							
F.State Facility's ID CAD 020748125						F.Transporter's Phone							
G.State Facility's ID CAD 020748125						H.Facility's Phone 8 05-937-8449							
US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12.Containers		13. Total		14. Unit		1. Waste No.	
						No. Type		Quantity		Wt/Vol			
HAZARDOUS WASTE SOLID NOS ORM-E NA 9189						03 DM		1200		P		491	
Additional Descriptions for Materials Listed Above TRI111 SANDUST PERLITE						K.Handling Codes for Wastes Listed Above RECEIVED JUN 2-6 1986							
15. Special Handling Instructions and Additional Information GLOVES										HAZARDOUS WASTE CONTROL PROGRAM			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.													
Printed/Typed Name						Signature			Date Month Day Year				
17. Transporter 1 Acknowledgement of Receipt of Materials						Signature			Date Month Day Year				
Printed/Typed Name						Signature			Date Month Day Year				
18. Transporter 2 Acknowledgement of Receipt of Materials						Signature			Date Month Day Year				
Printed/Typed Name						Signature			Date Month Day Year				
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name						Signature			Date Month Day Year				

MERCURY AEROSPACE FASTENERS

MICRODOT AEROSPACE FASTENING SYSTEMS

P.O. BOX 9759

NORTH HOLLYWOOD, CA 91609-9759

COUNTY OF LOS ANGELES - DEPT. OF HEALTH SERVICES
2615 South Grand Avenue - Room 507
Los Angeles, Ca. 90007

Public Health Programs

[Handwritten signature]

008500

EX-6 Personal Privacy

25-56 TC from MIRE MICRODOT,
re: Mercury (mercury) fasteners
1982 Serial by Woodfast Inc. or
aka Mercury fasteners Inc.
K 1981 - Serial 14045 - says an 8 some compliance

send to

MICRODOT
Del. Corp.

sec 9 1981 Purchase
mtr 12 1982 Close Escrow

mtrac - MICRODOT

Mercury for Woodfast Inc - Ralph Woodward
who's being sued by MICRODOT

741 Trichloroethylene (TCE)

520 Perchloroethylene (PCE)

755 Toluene

1,1,1 Trichloroethane (TCA)
(methyl chloroform)

756 Xylene

520 Ethyl Benzene

327 1,2 Dichloroethane (DuPont 101)

242 Dimethylene Chloride

134 Chlorobenzene



COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

313 NORTH FIGUEROA STREET • LOS ANGELES, CALIFORNIA 90012



PUBLIC HEALTH PROGRAMS

rice D. Roberts, Acting
Director

IN O. FINN, M.D., M.P.H.
Director

Reply refer to:
2615 South Grand Avenue, Room 607
Los Angeles, CA 90007
(213) 744-3223

DATE: 4-29-86

TO: Ed Early ADDRESS: 11800 Sherman Way, N. Hollywood
SUBJECT: mercury Aerospace Fasteners ADDRESS: 91605

In order to comply with the State Health and Safety Code / California Administrative Code,
you are directed to take the following actions marked below.

- ☐ 1) Discontinue immediately the disposal of hazardous wastes ()
to unauthorized locations ().
- ☐ 2) Discontinue immediately the transport of hazardous wastes ()
off site except by a registered hazardous waste hauler, under
manifest and to a State Health Department permitted facility.
- ☐ 3) Remove and legally dispose by , all hazardous wastes / contaminated
materials discharged to / stored at . (NOTE: All
hazardous waste transported off site by vehicle must be transported under Hazardous
Waste Manifest, by a State Health Department registered hauler).
- ☐ 4) Provide this office by , a site assessment and decontamination plan
for the above subject contaminated area.
- ☒ 5) Provide this office by 6-28-86 , a photo copy of the completed manifest
receipt used to dispose of waste trichloroethane.
- ☐ 6) Store by , all hazardous waste in a secure, contained, weather proof
and well posted manner pursuant to California Administrative Code, Title 22,
Section 66508, 67120.
- ☐ 7) Store by , all hazardous waste in non-leaking, properly labeled and
dated containers with tight fitting lids.
- ☐ 8) Discontinue the storage of hazardous waste / treatment of hazardous waste for longer
than without written permission from the State Department of Health
Services (213) 620-2380.
- ☐ 9) Maintain copies of all hazardous waste manifests and receipts at the above subject
facility for agency review.
- ☐ 10) Obtain an EPA Number from the State Department of Health Services (213) 620-2380 or
(916) 324-1781 prior to transport of any hazardous waste off site.
- ☐ 11) Provide this office by , a copy of a hazardous materials contingency
plan and employee training plan for the above subject facility pursuant to
California Administrative Code, Title 22, Sections 67120 to 67145 and 67105.
- ☐ 12) Additional Requirements: _____

RECEIVED BY: U.S. Mail

INSPECTOR:

Jerry Lile, R.S.

LEASE PRINT COUNTY OF LOS ANGELES - PUBLIC HEALTH LICENSE APPLICATION

DATE 4-29-86 DL # DATE BUSINESS STARTED 042986 MO DAY YR

ER(S) NAME(S) KAYNAR COMPANY LAST, FIRST AND MIDDLE INITIAL

OWNER(S) LAST, FIRST AND MIDDLE INITIAL

BUSINESS TRADE NAME MERCURY AEROSPAC FASTENERS

ADDRESS 11800 BEGINNING NO. ENDING NO. FRACTION DIR STREET SHERMAN WAY

CITY ZIP CODE NORTH HOLLYWOOD CA 91605

STATE ZIP CODE SIC 3490

OF BUSINESS LICENSED Hazardous waste control

818-982-4800

PREVIOUS ACCOUNT NUMBER IF ANY

SIGNATURE OF LICANT Dale R. Barber

SIGNATURE OF FIELD REPR. Jerry Lile, R.S.

ACCT 536619

BUSINESS CODE 101

DISTRICT CODE 13

FOR TAX COLLECTORS USE	
CURRENT FEE	\$
PRORATION	\$
PENALTY	\$
PRIOR YEAR FEE	\$
PRIOR YEAR PEN	\$
PAY TOTAL FEE DUE	\$

12-19

storage
55 gal tanks
todoland

20 sol.

wind: oil

all - cutting - 2,55 g.

pinch oil -

Kerosene.

Merch oil

live coal

saling Tower
filter changed

sand Blast
2 machines

machines

Grind
Drill Press
Cold Headers
Threaders
Hot Forge

Trickler
55 gal drum - waste

600 gal - waste oil

≈ 3 mos.

Kaynar

drain

Mercury Aerospace
~~at 18073~~

Rochford Pacific Inc.
CAD 980737035

Mixed oils Comb.
275 gals.

manifest # 84469119
11-14-85

Dale Barber

Air

Titanium
St. Steel

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD—
LOS ANGELES REGION107 SOUTH BROADWAY, SUITE 4027
LOS ANGELES, CALIFORNIA 90012-4596
(213) 620-4460

RECEIVED

HAZARDOUS MATERIALS
CONTROL PROGRAM

DF

December 21, 1988

Mr. Jim Cole
Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, CA 91605SUBSURFACE INVESTIGATION - AB 1803 FOLLOW UP PROGRAM
(FILE NO. 104.0728)

We are in receipt of the Subsurface Investigation Workplan prepared for your facility by your consultants, Enviropro, Inc. We have reviewed and evaluated the proposed workplan, and have no objections to its implementation, provided that all work is completed as specified, and the following items are incorporated:

1. Calibration equipment is to be on-site for field calibration of any organic vapor monitoring devices (e.g., PID) to be used. The rating of the detection lamp in eV for the PID is to be specified.
2. Contingency measures for the management, containment, and disposal of any grossly contaminated soils are to be provided.
3. Final boring locations are to be verified by in the field by Board Staff (site inspection) on the day boring is to commence.

Please notify this Regional Board one week prior to the day field work is to commence so that we may schedule an inspector to be present.

If you have any questions regarding this matter, please contact Mr. John Hostak at (213) 620-5485.

David A. Bacharowski
DAVID A. BACHAROWSKI
Environmental Specialist IV

cc: Mr. Bill Jones, County of Los Angeles, DHS
Mr. Rick Walls, Enviropro, Inc.

104.0728

STATEMENT BY DOMESTIC STOCK CORPORATION

THIS STATEMENT SHALL BE FILED WITH CALIFORNIA SECRETARY OF STATE INC. FILED CORPORATION CODE

THIS STATEMENT SHALL BE FILED WITH CALIFORNIA SECRETARY OF STATE INC. FILED CORPORATION CODE

ISSUED DATE 12/31/81 96088
 HUNTERY AEROSPACE FASTENERS, INC.
 11800 SHERMAN WAY
 HOLLYWOOD, CA 91609

FILED
 SACRAMENTO, CALIF.
 Nov 20 1981
 March Forgy
 SECRETARY OF STATE

DO NOT ALTER PRESENTED NAME IF NEW IS BLANK PLEASE ENTER CORPORATE NAME			
CORPORATION ORGANIZED UNDER THE LAWS OF THE STATE OF CALIFORNIA, MAKES THE			
1. STATE ADDRESS OF REGISTERED OFFICE	2. NAME OF OFFICE	3. CITY AND COUNTY	4. ZIP CODE
11800 SHERMAN WAY		HO HOLLYWOOD, CA	91609
5. REGISTERED OFFICE ADDRESS IN STATE OF CALIF.	6. NAME OF OFFICE	7. CITY AND COUNTY	8. ZIP CODE
SAME			
9. REGISTERED OFFICE ADDRESS	10. NAME OF OFFICE	11. CITY AND COUNTY	12. ZIP CODE
SAME			

THE FOLLOWING OFFICERS ARE:			
1. NAME OF OFFICER	2. ADDRESS OF OFFICER	3. CITY AND COUNTY	4. ZIP CODE
RALPH WOODHOUSE	11800 SHERMAN WAY	HO HOLLYWOOD, CA	91609
BETTY WOODHOUSE	SAME		
LESTER BOND	SAME		

THE FOLLOWING ARE THE BUSINESS OR RESIDENCE ADDRESSES OF INCUMBENT DIRECTORS INCLUDING THOSE DIRECTORS WHO ARE			
1. NAME OF DIRECTOR	2. ADDRESS OF DIRECTOR	3. CITY AND COUNTY	4. ZIP CODE
RALPH WOODHOUSE	11800 SHERMAN WAY	HO HOLLYWOOD, CA	91609
BETTY WOODHOUSE	SAME		
LESTER BOND	SAME		

THE NUMBER OF VACANCIES ON THE BOARD IS AND

AGENCY FOR SERVICE OF PROCESS Ralph Woodhouse 11800 Sherman Way

CALIFORNIA BUSINESS IS THE BUSINESS ADDRESS IF ANY DIFFERENTIAL FROM THE ADDRESS IN RESIDENCE IS A COMPANY MAILING ADDRESS FOR THE COMPANY

DATE OF BUSINESS Best Henderson

DATE OF STATEMENT 12/31/81 John Peers

61 397011

00310

3/10
COUNTRY: USA
CITY: NEW YORK
STATE: NY
ZIP: 10011
DATE: 12-21-1991
PROOF COMPLAINT: 11-14-1

COMPLETE OFFICERS: 11-21-1991 1397111
DOMESTIC - STOCK
NAME: WOODFAST, INC.
ADDRESS: 11810 SHERMAN WY
NORTH HOLLYWOOD, CA 91509
PRES.: RALPH WOODHOUSE 11810 SHERMAN WY NORTH HOLLYWOOD, CA 91509
AGENT: RALPH WOODHOUSE 11810 SHERMAN WY NORTH HOLLYWOOD, CA 91509
NAME CHANGE: DATE: 03-17-1992
FROM NAME: MERCURY AEROSPACE FASTENERS, INC.
DISSOLVED: 12-22-1992

CASE # 31311383

11/8 Mercury Aerospace Fasteners
11800 Sherman Way
N. Hollywood 91605

LAKEWOOD
OIL SERVICE, INC.
P.O. BOX 3383
SANTA FE SPRINGS, CA 90670
(213) 863-8755 • (714) 522-8112

6/16/82 10662

FX-4 CBI Determined

FX-4 CBI Determined

90-2593/1222

PAY

Thirty Dollars ^{CN/100}

DATE 6-15-83 AMOUNT 32.00

TO
THE
ORDER
OF

Mercury Aerospace

OIL PURCHASES ACCOUNT NO. 0

[Signature] A

FX-4 CBI Determined

PAYABLE AT THE ORDER OF CALIFORNIA IMPERIAL BANK OF COMMERCE, NEW YORK

1-255

10311

30 Aircraft Fat

Date of work Tues 6/27/82
0600

County of Los Angeles
Department of Health Services
Occupational Health Division
Hazardous Waste Control Program
2515 S Grand Ave., 6th Floor
Los Angeles, CA 90007
City of Los Angeles



OFFICIAL NOTICE OF VIOLATION No 267845
County of Los Angeles Department of Health Services
Preventive/Public Health
Environmental Management

DATE

ADDRESS

ADDRESS

SUBJECT

Los Angeles

California Administrative Code

State Health and Safety Code

This notice shall be complied with as required by

Other Code

City Ordinance No

County Ordinance No 7583

LOS ANGELES COUNTY HEALTH OFFICER

BY

WHITE VIOLATOR YELLOW SANITARIAN PINK DISTRICT DIRECTOR

MAILED BY

MAIL SERVICE

DATE

TIME

CLASS

CE

NO

581

11/22/84

DEPT. OF HEALTH SERVICES
PUBLIC HEALTH LABORATORIES
300 S. GARDEN ST.
ANN ARBOR MI 48106

DEPT. OF HEALTH SERVICES
PUBLIC HEALTH LABORATORIES
300 S. GARDEN ST.
ANN ARBOR MI 48106

HAZARDOUS MATERIALS SAMPLE ANALYSIS REPORT

FIELD SECTION

by W. Jones / L. Bishop Date Sampled 5/21/84 Time 7:30 PM Room

Loc of Sample Mercer Aerosol Factory
Name of company, disposal site, etc.

SS 11800 Shoppers Warehouse North Holly Wood
number street city state zip

Phone () Company Contact

✓	✓	✓	✓	✓
WT 5/21-A	WT 5/21-B	LT 5/21/B	LT 5/21/C	LB 5/21-E
Liquid	Soil	Liquid	oil	Soil
Pool S.W. corner of Plant offsite U. of R.R. Track	E. Pool S.W. corner of Plant offsite U. of R.R. Track	N. of R.R. Track S.W. corner of Bldg. 7	Load dock S.E. corner of Bldg. 8	off site S.W. corner of Bldg. 8
NO ₃ , PH, CU	→	→	oil + grease	oil G, NO ₃ , CU, PH

HOLD

LABORATORY SECTION

Anal by Title Date

Allocations REL REL REL REL REL Date

TW483-84	TW484-84	TW485-84	TW486-84	TW487-84
4.1	3.9	0.6	—	8.2
64,500	12,200	4730	—	5340
—	—	—	88.8 %	12.7 %

NO₃: Lab does not have the proper equipment to run NO₃, in such sample

James Graham 6/15/84

CLERK OF RECORDS

Signature	Agency/Organization	Inclusive Date
<u>Lawrence Bishop</u>	<u>Hazardous Waste</u>	<u>5/21/84</u> <u>5/22/84</u>
<u>Thomas J. Smith</u>	<u>L.A. Co. Pub. Health Lab.</u>	<u>5/22/84</u> <u>6/12/84</u>
<u>William Jones</u>	<u>HAZ WASTE LACHD</u>	<u>6/12/84</u> <u>6/13/84</u>

1 Week

Comprehensive Health Services
Federal Health Laboratory
1015 G Street, S.W.
Washington, D.C. 20001
(202) 741-0121

DEPT. OF HEALTH SERVICES
FEDERAL HEALTH LABORATORIES

HAZARDOUS MATERIALS SAMPLE ANALYSIS REQUEST

FIELD SECTION

by W. Jones / L. Bishop Date Sampled 5/21/84 Time 2:30 PM Room

is of Sample Marcum Aerospace fasteners
name of company, disposal site, etc.

11800 Sherman Way North Hollywood state zip
number street city

name () Company Contact

✓	✓	✓	✓	✓	✓
WT 5/21-A	WT 5/21-B	LB 5/21/C	LB 5/21/D	LB 5/21/E	LB 5/21/F
Liquid	Soil	Liquid	oil	Soil	Soil
Pond S.W. corner of plant offsite N. of R.R. track	By Pond S.W. corner of plant offsite N. of R.R. track	N. of Acid Bath S.W. corner of Bldg. by ramp.	Load and dock S.E. corner of Bldg. off end of ramp.	oil 500-keel area off site S.W. corner of Bldg.	Background
NO ₃ , PH, CU	→	→	oil + grease	oil, NO ₃ , CU, PH	NO ₃

LABORATORY SECTION

Requested by Title Date

Allocation: DEL LEL LAEL SRL Date

	TW483-84	TW484-84	TW485-84	TW486-84	TW487-84
1)	4.1	3.9	0.6	—	8.2
2)	64,500	12,200	4730	—	5340
3)	—	—	—	88.8 %	12.7 %
Note: Lab does not have the proper equipment to run NO ₂ in such samples					
James Graham 6/15/84					

Signature	Agency/organization	Inclusive date
Lawrence Bishop	Hazardous Waste	5/21/84 5/22/84
Thomas J. Smith	L.A. Co. Pub. Health Lab.	5/22/84 6/12/84
	Haz Waste LACHD	6/12/84 6/13/84

Plaintiff: City of New York

Public Health Laboratory
2515 E. 66th St. - 2nd Fl.
Long Beach, CA 90801
(313) 744-1221

PUBLIC HEALTH LABORATORIES

HAZARDOUS MATERIALS SAMPLE ANALYSIS REQUEST

SECTION I: FIELD SECTION

Director: L. Bishop Date Sampled: 5/1/84 Time: _____ Hours: _____
Location of Sampling: Marijuana - Horseshoe - 1st Fl.
Name of company, disposal site, etc.: _____
Address: _____
Number: _____ Street: No. Hollywood City: LA. State: _____ Zip: _____
Telephone: (____) _____ Company Contact: _____

NO.	<u>LE 5141/D</u>					
E OF	<u>Soil</u>					
LOC OF	<u>N.W. Corner of</u>					
E	<u>Main Bldg. on</u>					
	<u>vacant lot</u>					
TEST FOR	<u>PH NO₃ CU</u>					

RE: Oil & grease

Hold for evidence

SECTION II: LABORATORY SECTION

Received by: _____ Title: _____ Date: _____
Sample Allocation: EM LEL LAEL SPL Date: _____

NO.	<u>TV 516-84</u>					
TEST PH	<u>6.1</u>					
W (PPM)	<u>23.3</u>					
1/4 Grease (PPM)	<u>1150</u>					

NO₃ Lab does not have the proper instrumentation to run NO₃ in such samples.

(S) _____ Samuel A. Thabin 6/14/84

SECTION III: CHAIN OF CUSTODY

signature	agency/organization	inclusive date
<u>L. Bishop</u>	<u>Hwy Waste Control</u>	<u>5/7/84</u>
<u>Samuel A. Thabin</u>	<u>Public Health Lab</u>	<u>6/8/84</u>

LOG 60

WJ

1/9/84/2

10/83

LANT SURVEY TELEPHONE REQUEST
 PUBLIC HEALTH PROGRAMS - OCCUPATIONAL HEALTH
 COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES

DATE

1-9-83

RECEIVED BY

M. Garcia

NAME OF PLANT

MERCURY Aerospace FASTENERS

PERSON TO CONTACT

TELEPHONE NO.

ADDRESS OF PLANT

11800 Sherman Way, NORTH Hollywood

NATURE OF REQUEST

Dumping Southern Pacific, oily
 green, platyng mix cleaning area next to
 1230-100 wall of property line ~~to~~
 Dec 7, 1983 month before also.
 1/2 gallon per minute, regulate normal
 routine. relating to cleaning of machine
 parts

EXACT SITE IN PLANT INVOLVED

SERVICE REQUESTED BY

WJP

ADDRESS

111 N Hope St A-118
 Dan Goodroe L.A. 90012

TELEPHONE NO.

481-3170

REFERRED TO:

DISPOSITION

3/27/84: Observed green lig & oily waste on S side of property, possibly
 on railroad property. Will return 3/28 for photos & sampling - area is
 removed from any public xps; also used key cat hit for possible
 in as alleged - did not confront owners at this time. @

5/21/84 Inspection made - see report.

INVESTIGATION DATE

5-21-84

INVESTIGATOR'S INITIALS

WJP



COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

313 NORTH FIGUEROA STREET • LOS ANGELES, CALIFORNIA 90012



PUBLIC HEALTH PROGRAMS

GLAS N. STEELE
City Director

RTIN O. FINN, M.D., M.P.H.
Health Director

Reply to:
2515 South Grand Avenue, Room 607
Los Angeles, CA 90007
(213) 744-3223

May 22, 1984

State of California
Secretary of State
1230 "J" Street
Sacramento, CA 95814

Dear Madam:

In connection with our criminal cases involving court or jury trials, we are required to show to the court a certified copy or copies of Articles of Incorporation, Amendments, and Statement of Officers, for corporations located within the State of California.

We therefore are requesting certified copies of these documents on the corporations listed below:

Mercury Aerospace Fasteners
A Division of:

Microdot Fastening Systems, Inc.
11800 Sherman Way
No Hollywood, CA 91609

Thank you for your cooperation in this matter.

Very truly yours,

Anastacio G. Medina

Anastacio G. Medina, Acting Chief
Occupational Health

AM:bp

901



March Fong Eu
Secretary of State

1230 J Street
Sacramento, California 95814

June 5 1984

CORPORATE DIVISION

Legal Review	(916) 445-0620
Certification	(916) 445-1430
Status	(916) 445-2900
Microfilm Records	(916) 445-1768
Name Availability	(916) 322-2387
Trademarks	(916) 445-9872
Statement of Officers	(916) 445-2020
Service of Process	(916) 445-0620
Los Angeles Office	(916) 620-3104

County of Los Angeles, Department of Health Services
313 North Figueroa Street
Los Angeles, California 90012
Attention: Anastacio G. Medina

This is in answer to your inquiry of May 22 1984

The records of this office indicate that MICRODOT FASTENING SYSTEMS, INC.

- ☒ Is not of record in this office as either a California domestic corporation or a foreign corporation.
☐ Is a California corporation incorporated _____
☐ Is in good legal standing _____
☐ A statement as to the names and addresses of agent, officers and directors and address of principal office is on file in this office. ☒ A COPY OF THE FILED STATEMENT MAY BE OBTAINED FOR A FEE OF \$1.00. Nonprofit corporations are not required to list directors.
☐ A statement as to names and addresses of officers and address of principal office has not been filed in this office.
☐ An agent for service of process has not been designated.
☐ Was suspended by order of the Franchise Tax Board _____ for not complying with statutory requirements.
☐ Was suspended by the Secretary of State _____ for failure to file a statement of officers.
☐ Was dissolved _____ ☐ Its term of existence expired _____
☐ Was merged into: _____
☐ Is a _____ corporation which has been qualified in California since _____
☐ Is in good legal standing _____
☐ Agent for service of process: _____

☐ Surrendered its right to transact intrastate business in California _____ for
☐ Forfeited its right to transact business in California _____ for not complying with statutory requirements.
☒ Copies of bylaws and names of shareholders or owners are not required to be filed with this office.
☒ Information regarding related businesses of individual corporate entities is not required to be filed with this office.
☒ Foreign corporations are not required to file names and addresses of officers with this office.
☒ Statement for the corporation MERCURY AEROSPACE FASTENERS, INC. which had a name change to WOODFAST, INC. is enclosed.

March Fong Eu 10076

HAZARDOUS WASTE CONTROL PROGRAM
SITE CLEAN-UP PLAN

DATE June 11, 1984 INSPECTOR William Jones

I. COMPANY NAME / ADDRESS Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, CA. 91609

LOCATION OF CLEAN-UP 11800 Sherman Way
North Hollywood, CA. 91609

GENERATOR HAZARDOUS WASTE ID NO. CAX 000083618

MATERIALS INVOLVED / VOLUME Nitric acid and oil contaminated soil. Approximately
70 tons.

II. DATE CLEAN-UP BEGINS June 20, 1984 TIME 0800

DATE CLEAN-UP TO BE COMPLETED June 22, 1984 TIME 1600

COMPANY PERFORMING CLEAN-UP / HAULING Falcon Disposal (714-995-7050)

ADDRESS 3031 East "I" Street
Wilmington, CA. 90744

CLEAN-UP COMPANY REPRESENTATIVE William Burns

EPA ID NO. CAD 000048934

STATE HAULER'S ID NO. 210

DISPOSAL SITE TO BE USED / ADDRESS BKK Landfill (213-965-0911)
2210 Azusa Ave.
West Covina, CA.

II. STATE CERTIFIED LAB TO BE USED Analytical Research Laboratories, Inc.

ADDRESS 160 Taylor Street, Monrovia, CA. 91016

STATE CERTIFIED LAB PERMIT NO. SR-AP17-648457

00037

. Attach addenda to include the following:

- A. A testing procedure to be used to determine the extent of contamination in the affected area.
- B. A testing procedure to indicate after clean-up that the contamination has been reduced to background levels or below levels set by the State Department of Health Services.
- C. Method(s) of clean-up -- (Be complete, including equipment, protective gear for personnel, procedures to be used, how containers or barrels will be disposed of, any necessary monitoring, etc.)

. All information and attachments must be sent to this office (complete) for approval prior to commencement of clean-up. If you have any questions, contact the Health Officer handling the case at (213) 744-3223.

Company Representative (Print)

JAMES T. REEBER

Title

VICE PRESIDENT AND GENERAL MGR

Signature

James T. Reeber

Send Forms to: Hazardous Waste Control Program
2615 So. Grand Avenue, Room 607
Los Angeles, California 90007
ATTENTION: (Officer Handling Case)



COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

313 NORTH FIGUEROA STREET • LOS ANGELES, CALIFORNIA 90012



PUBLIC HEALTH PROGRAMS

UGLAS H. WHEELER
Deputy Director

MARTIN D. FINN, M.D., M.P.H.
Medical Director

Reply refer to:
2615 South Grand Avenue, Room 607
Los Angeles, CA 90007
(213) 744- 3235

May 24, 1984

Mr. Jim Reeber
General Manager, V.P.
Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, California 91609

SUBJECT: HAZARDOUS WASTE DISCHARGE AND VIOLATIONS
OF HAZARDOUS WASTE CONTROL LAWS

Dear Mr. Reeber:

On May 21, 1984, Senior Environmental Health Officer William Jones and Industrial Hygienist Larry Bishop conducted an inspection of the above mentioned location in response to an interagency complaint. Violations of the California Hazardous Waste Control Laws were observed and must be corrected as follows:

- 1) As per Official Notice of Violation #267845, discontinue immediately the discharge/disposal of hazardous waste (acid, oils, etc.) to unauthorized locations.
- ✓ 2) Discontinue immediately, the unlawful transport of hazardous waste (e.g., nitric acid stripping solution) without the necessary State permits. All hazardous waste must be transported by a State registered hazardous waste hauler and disposed of at an authorized location (i.e., Class I disposal site or permitted recycling facility).
- 3) Remove and locally dispose, within 30 days of this Notice, all hazardous waste and material contaminated with hazardous waste from the soil areas adjacent to the plant facility and from any other on-site area (e.g., barrels at southeast corner of site).
- 4) Provide this office, within 10 days after disposal, a completed copy of the hazardous waste manifest(s) used to dispose of the above mentioned wastes.

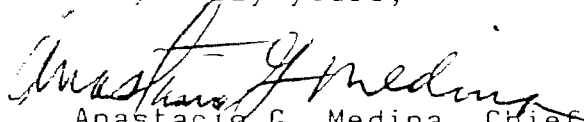
625716

Mr. Jim Reeber
May 24, 1984
Page 2

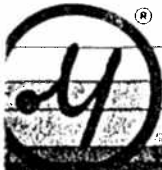
- 5) Complete and return to this office no later than June 8, 1984, the enclosed site clean-up plan. All items must be addressed on the form to ensure a timely approved process.
- 6) Provide for the proper storage of hazardous waste at once, in accordance with CAC Title 22, Section 66535 and CFR Title 40, Section 262.34 to ensure the proper containment, labeling, security, and disposal of these wastes.
- 7) Contact Anita Follett at (916) 324-2992 to obtain a generator identification number.
- 8) Contact L.A. City Industrial Waste for disposal options.

If you have any questions, please feel free to contact Mr. William Jones at (213) 744-3235.

Very truly yours,


Anastacio G. Medina, Chief
Hazardous Waste Control Program

AGM:WJ:s



MICRODOT AEROSPACE FASTENING SYSTEMS

ALTERNATIVE FASTENING SYSTEMS • MERCURY AEROSPACE FASTENERS • MICRODOT INSERTS

P.O. BOX 3001 • FULLERTON, CA 92634-3001 • (714) 871-1550 • TWX 910-592-1239 • TELEX 655367

June 11, 1984

Mr. William Jones
County of Los Angeles
Department of Health Services
313 N. Figueroa St.
Los Angeles, CA 90012

Subject: Hazardous Waste Control Program
Site Clean Up Plan

Dear Mr. Jones:

The following is an addenda to the Hazardous Waste Control Program Site Clean Up Plan for Mercury Aerospace facility.

- (A) The following testing procedure was used to determine the extent of alleged contamination in the affected area.
 - (a) Alleged nitric acid contaminated area, three surface samples and three samples were taken at a depth of three feet. The accompanying photographs denote area of sampling.
 - (b) In the area of the oil contamination, four samples were taken. Two were surface samples and two were samples taken from a depth of three feet.

All three foot depth samples were obtained with a post hole auger. Samples were taken to the Analytical Research Laboratories, Inc. located in Monrovia for the required soil analysis. Results will be available about June 15, 1984.

- (B) Upon completion of the excavation, grab samples will be collected from the areas of major contamination and analyzed to determine that the clean up area does not contain compounds in excess of that found for background samples for state standards.
- (C) The excavation will be done with a 755 backhoe loading directly into a registered semi-end dump. By direct loading, we feel that there will be no spreading of the contaminated soil and that with a 20 foot reach on the backhoe our depth may be accomplished without hand labor. We will provide a watering device to control any dust particulates. The operator, laborer and foreman will be required to wear disposable

906719

Mr. William Jones

June 11, 1984

-2-

tie back suits, disposable rubber gloves and issued rubber boots. The boots will be brushed clean before leaving site. The field personnel will also be required to use a half-face Norton respirator No. 7500-30M with a 7500-3 filter.

The truck drivers will be required to stay in their trucks with the windows up or away from the loading operation until the truck is loaded.

We feel that by keeping the area damp there will be no need to set up any air monitoring stations.

The excavation will take one day. We will provide barricades around the area after excavation until it can be back filled with clean fill material. The contaminated soil will be manifested and sent to the designated Class 1 landfill. It appears at this time the areas in question are contaminated from approximately 6 inches to 3 feet. The total quantity at this time is not known, but appears to be about 60 tons.

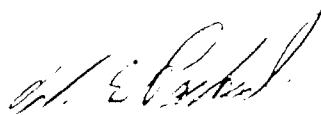
We will send you a copy of our test results when the lab is fully done with them.

At the present time Falcon Disposal is working on a program for disposal of the containers and barrels noted in your violation notice.

If there are any further questions, please contact me at (714) 871-1550, extension 361.

Sincerely,

MICRODOT AEROSPACE FASTENING SYSTEMS



W. E. Packard
Safety Manager

WEP:gj
Enclosures

D8130-13833 to
13837 incl.

AB. No.

EC'D

EPT'D

0

CITY OF LOS ANGELES
DEPARTMENT OF GENERAL SERVICES

STANDARDS

2319 DORRIS PLACE
LOS ANGELES, CA 90031
485-2242

6-13-84

6-14-84

Mr. William Jones

L.A. County Hazardous Wastes Section

2615 S. Grand Ave., Room 607

Los Angeles, Ca. 90007

cc: Mr. Michael Miller
Bureau of Sanitation

NITRATE TESTS

Two samples of liquids and three samples of solids were tested for Los Angeles County at the request of Mr. Miller.

From: Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, Ca.

Sampled by: Jones & Bishop

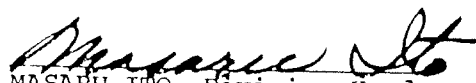
Tests were made with an Orion Specific Ion Meter and a nitrate specific ion electrode.

IDENTIFICATION OF SAMPLES

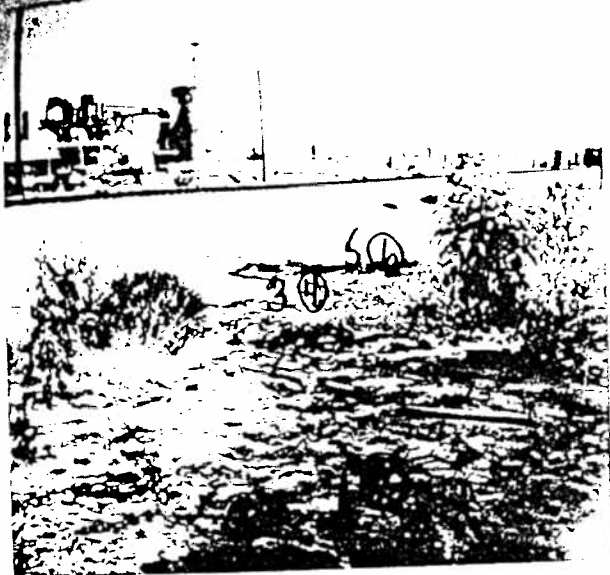
<u>Sample No.</u>	<u>Marked</u>	<u>Type</u>	<u>Description</u>
1	TW 483-84	Liquid	Pond on SW corner plant, off site, North of RR tracks
2	TW 484-84	Solid	Soil, SW plant, 2 ft from fence, N/o RR tracks
3	TW 485-84	Liquid	Nitric acid bath, SW corner Bldg.
4	TW 487-84	Solid	Soil, oil soaked, SW Corner of Bldg.
5	LB 5/21/F	Solid	Soil, for background, N/W corner of Bldg.

TEST DATA

<u>Sample No.</u>	<u>Nitrates</u>
1	4,100 MG/L
2	38,990 MG/KG, as received basis
3	920,000 MG/L
4	1,027 MG/KG, as received basis
5	28 MG/KG, as received basis


MASARU ITO, Division Head
General Services/Standards

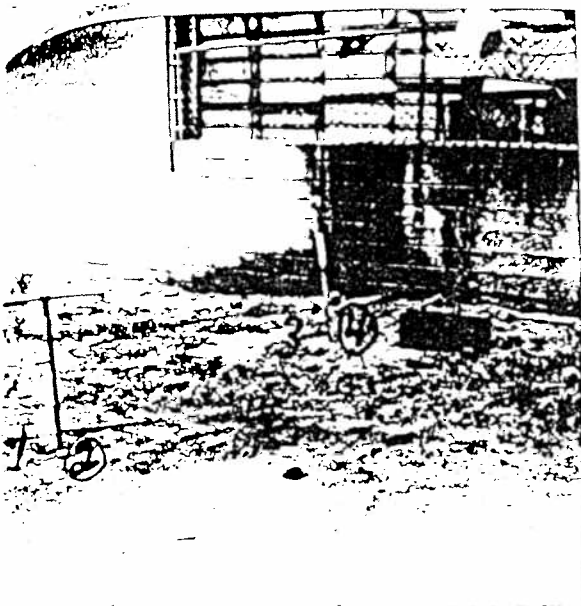
MI:NUK:my



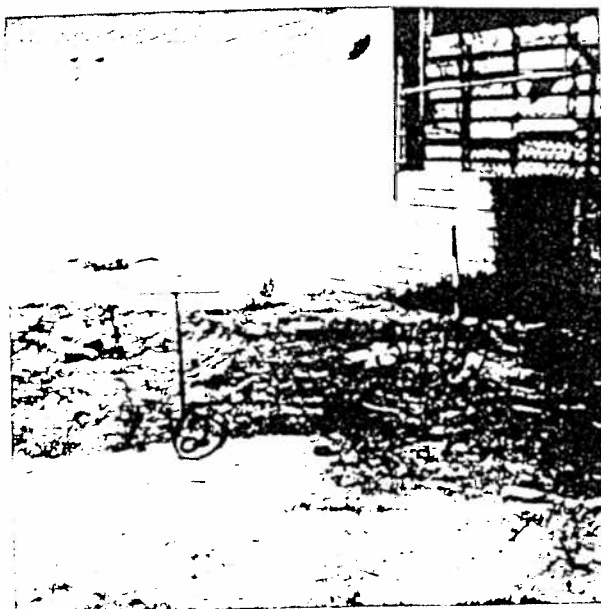
1, 3, 5 SURFACE
2, 4, 6 - 3' DEPTH



1, 3, 5 - SURFACE
2, 4, 6 - 3' DEPTH



OIL SOIL
1 - SURFACE
2 - 3' DEPTH



OIL SOIL
3 - SURFACE
4 - 3' DEPTH

Receiving -

Sample Identity

- 1 - #1 Surface Path
- 2 - #2 3' Depth ; Surface Path
- 3 - #3 Surface - South side of pooling area
- 4 - #4 3' Depth - South side of pooling area
- 5 - #5 Surface - North side of pooling area
- 6 - #6 3' Depth - North side of pooling area
- 7 - Oil Soil #1 - Surface
- 8 - Oil Soil #2 - Depth 3'
- 9 - Oil Soil #3 - Surface
- 10 - Oil Soil #4 - Depth 3'



GERALD L. DELKER, Ph.D.
Research Chemist
Supervisor

ANALYTICAL RESEARCH LABORATORIES, INC.
160 Taylor Street, Monrovia, Calif. 91016 (213) 357-3247

Mercury

Mercury Aerospace Fasteners Facility
11800 Sherman Way
North Hollywood, Ca. 91609

Metal, mg/kg

Sample	pH	Arsenic	Copper	Calcium	Chromium	Lead	Mercury
①	8.8		475. #	31.5	680.	48.	
2	5.7		96.	1.5	9.0	5.0	
③	8.5		650. #	38.	310.	30.	
4	7.9		25.	0.8	13.4	8.0	
⑤	8.3		1550. #	91.	750.	5.0	
6	7.5		25.	1.7	7.2	7.0	
⑦	6.9		625. #	39.	320.	122.	
8	8.1		11.	0.7	8.6	8.0	
⑨	8.2		3700. #	220. #	1350.	76.	
10	6.6		52.	4.8	16.9	8.0	
action Limit			1.	0.2	0.5	5.	
M TLC		500.	(2500)	100.	2500.	1000.	20.

	Nickel	Barium	Thallium	Zinc
1	375.		<5.	215.
2	24.		<5.	34.
3	270.		<5.	180.
4	35.		<5.	53.
5	612.		<5.	360.
6	20.		<5.	61.
7	221.		<5.	450.
8	38.		<5.	36.
9	1040.		13.	1600.
10	37.		<5.	44.
action Limit	5.		5.	0.1
M TLC	2000.	100.	200.	2600.

* - Exceeds TLC

D8130-13833 to
13837 incl.

No.

6-13-84

6-14-84

Mr. William Jones

L.A. County Hazardous Wastes Section

2615 S. Grand Ave., Room 607

Los Angeles, Ca. 90007

cc: Mr. Michael Miller
Bureau of Sanitation

CITY OF LOS ANGELES

DEPARTMENT OF GENERAL SERVICES

STANDARDS

2319 DORRIS PLACE
LOS ANGELES, CA 90031
485-2242

NITRATE TESTS

Two samples of liquids and three samples of solids were tested for
Los Angeles County at the request of Mr. Miller.

From: Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, Ca.

Sampled by: Jones & Bishop

Tests were made with an Orion Specific Ion Meter and a nitrate specific
ion electrode.

IDENTIFICATION OF SAMPLES

<u>Sample No.</u>	<u>Marked</u>	<u>Type</u>	<u>Description</u>
1	TW 483-84	Liquid	Pond on SW corner plant, off site, North of RR tracks
2	TW 484-84	Solid	Soil, SW plant, 2 ft from fence, N/o RR tracks
3	TW 485-84	Liquid	Nitric acid bath, SW corner Bldg.
4	TW 487-84	Solid	Soil, oil soaked, SW Corner of Bldg.
5	LB 5/21/F	Solid	Soil, for background, N/W corner of Bldg.

TEST DATA

<u>Sample No.</u>	<u>Nitrates</u>
1	4,100 MG/L
2	38,990 MG/KG, as received basis
3	920,000 MG/L
4	1,027 MG/KG, as received basis
5	28 MG/KG, as received basis

MASARU ITO, Division Head
General Services/Standards

MI: [✓]NJK:my



MICRODOT AEROSPACE FASTENING SYSTEMS

MICRODOT AEROSPACE FASTENING SYSTEMS • MICRODOT INSERTS

P.O. BOX 3001 • FULLERTON, CA 92634-3001 • (714) 871-1550 • TWX 910-592-1239 • TELEX 655367

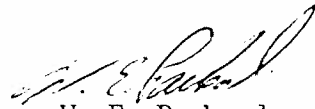
June 27, 1984

Mr. William Jones
County of Los Angeles
Department of Health Services
310 N. Figueroa St.
Los Angeles, CA. 90012

Dear Bill:

Per your verbal approval of the site clean up proposal for the Mercury Aerospace Facility during our telephone conversation on this date, Bill Burns of Falcon Disposal was contacted regarding a clean up date.

They will be able to start the clean up on Tuesday, July 3, 1984 in accordance with your recommendations.


W. E. Packard
Safety Manager

6.30.84



COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

313 NORTH FIGUEROA STREET • LOS ANGELES, CALIFORNIA 90012



PUBLIC HEALTH PROGRAMS

DOUGLAS R. STEELE
Deputy Director

MARTIN D. FINN, M.D., M.P.H.
Medical Director

Reply refer to:
2615 South Grand Avenue, Room 607
Los Angeles, CA 90007
(213) 744- 3235

June 28, 1984

Microdot Aerospace Fastening Systems
P.O. Box 3001
Fullerton, CA

Attention William Packard, Safety-Security Manager

Dear Mr. Packard:

HAZARDOUS WASTE CLEANUP - MERCURY AEROSPACE FASTENERS
11800 Sherman Way, No. Hollywood, CA 91609

This letter is to inform you that your proposed clean-up plan has been reviewed and approved by this department.

Pursuant to our telephone conversation of 6/27/84, all soil visibly contaminated with oil shall be removed. In addition, the rear area adjacent to the railroad tracks shall be excavated to a depth of approximately 1½-2 feet. The completion of the clean-up will be contingent on final sampling which will be split with this department.

Please inform this office as soon as possible as to your revised timetable. Also, if you have any further questions, please feel free to contact William Jones, at 744-3235.

Very truly yours,

Anastacio Medina
Anastacio G. Medina, Chief
Hazardous Waste Control Program

WJ:bp

cc: Mercury Aerospace Fasteners, Art Mulloy, Plant Mgr. 980372

PRIORITY _____
explain: _____

County of Los Angeles
Department of Health Services
Occupational Health Division
Hazardous Waste Control Program
1515 S. Grand Ave., 10th Floor
Los Angeles, CA 90007
(213) 744-1221

LOS ANGELES COUNTY
DEPARTMENT OF HEALTH SERVICES
PUBLIC HEALTH LABORATORIES

HAZARDOUS WASTE SAMPLE ANALYSIS REQUEST

PART I: FIELD SECTION

Collector Bill Jones
Gene Matsushita Date Sampled 7/3/84 Time 8:59 Hours _____
Location of Sampling Mercury Aerospace
name of company, disposal site, etc.
Address 11800 Sherman Way N Hollywood
number street city state zip
Telephone (____) _____ Company Contact Bill Packard

FIELD NO.	<u>GM73</u>				
SAMPLE OF	<u>Soil</u>				
LOCATION OF SAMPLE	<u>Rear area behind lot after excavation</u>				
ANALYZE FOR	<u>Cu Cd</u>				

REMARKS:

PART II: LABORATORY SECTION

LAB NO.	<u>TIV 690-84</u>				
FINDINGS					
Cu (PPM)	<u>9.37</u>				
Cd (PPM)	<u>ND</u>				

Samuel Graham 8/2/84

PART III: CHAIN OF POSSESSION

	Signature	Agency/Organization	Inclusive Dates
1.	_____	_____	_____
2.	<u>William Jones</u>	<u>Los Angeles</u>	<u>7-19-84</u> <u>7-19-84</u>
3.	<u>John S. Long</u>	<u>Public Health Lab</u>	<u>7/20/84</u>
4.	_____	_____	_____



COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

313 NORTH FIGUEROA STREET • LOS ANGELES, CALIFORNIA 90012



PUBLIC HEALTH PROGRAMS

DOUGLAS R. STEELE
Deputy Director

MARTIN D. FINN, M.D., M.P.H.
Medical Director

RECEIVED

AUG 6 - 1984

HAZARDOUS WASTE
CONTROL PROGRAM

Reply refer to:
2615 South Grand Avenue, Room 607
Los Angeles, CA 90007
(213) 744- 3235

July 23, 1984

State of California
Secretary of State
1230 'J' Street
Sacramento, California 95814

Dear Madam:

In connection with our Criminal Cases involving court or jury trials we are required to show to the court a certified copy or copies of Articles of Incorporation, Amendments, and Statement of Officers, for corporations located within the State of California.

We, therefore, are requesting certified copies of these documents on the corporation(s) listed below:

Microdot, Inc.
P.O. Box 3001
Fullerton, California 92634-3001

Thank you for your corporation in this matter.

Very truly yours,

Anastacio G. Medina 28

Anastacio G. Medina, Chief
Hazardous Waste Control Program

AGM:WJ:s

SECRETARY OF STATE

JUL 27 1 42 PM '84

RECEIVED
SA. BUREAU
JUL 27 1984

mkl
6-3-74
715624
Fournier



MICRODOT AEROSPACE FASTENING SYSTEMS

7700 KAYNAR BLVD. • MERCURY AEROSPACE FASTENERS • MICRODOT INSERTS

P.O. BOX 3001 • FULLERTON, CA 92634-3001 • (714) 871-1550 • TWX 910-592-1239 • TELEX 655367

June 11, 1984

Mr. William Jones
County of Los Angeles
Department of Health Services
313 N. Figueroa St.
Los Angeles, CA 90012

Subject: Hazardous Waste Control Program
Site Clean Up Plan

Dear Mr. Jones:

The following is an addenda to the Hazardous Waste Control Program Site Clean Up Plan for Mercury Aerospace facility.

- (A) The following testing procedure was used to determine the extent of alleged contamination in the affected area.
 - (a) Alleged nitric acid contaminated area, three surface samples and three samples were taken at a depth of three feet. The accompanying photographs denote area of sampling.
 - (b) In the area of the oil contamination, four samples were taken. Two were surface samples and two were samples taken from a depth of three feet.

All three foot depth samples were obtained with a post hole auger. Samples were taken to the Analytical Research Laboratories, Inc. located in Monrovia for the required soil analysis. Results will be available about June 15, 1984.

- (B) Upon completion of the excavation, grab samples will be collected from the areas of major contamination and analyzed to determine that the clean up area does not contain compounds in excess of that found for background samples for state standards.
- (C) The excavation will be done with a 755 backhoe loading directly into a registered semi-end dump. By direct loading, we feel that there will be no spreading of the contaminated soil and that with a 20 foot reach on the backhoe our depth may be accomplished without hand labor. We will provide a watering device to control any dust particulates. The operator, laborer and foreman will be required to wear disposable

100324A

tie back suits, disposable rubber gloves and issued rubber boots. The boots will be brushed clean before leaving site. The field personnel will also be required to use a half-face Norton respirator No. 7500-30M with a 7500-3 filter.

The truck drivers will be required to stay in their trucks with the windows up or away from the loading operation until the truck is loaded.

We feel that by keeping the area damp there will be no need to set up any air monitoring stations.

The excavation will take one day. We will provide barricades around the area after excavation until it can be back filled with clean fill material. The contaminated soil will be manifested and sent to the designated Class 1 landfill. It appears at this time the areas in question are contaminated from approximately 6 inches to 3 feet. The total quantity at this time is not known, but appears to be about 60 tons.

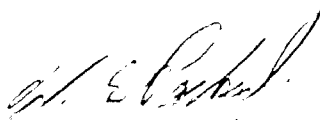
We will send you a copy of our test results when the lab is fully done with them.

At the present time Falcon Disposal is working on a program for disposal of the containers and barrels noted in your violation notice.

If there are any further questions, please contact me at (714) 871-1550, extension 361.

Sincerely,

MICRODOT AEROSPACE FASTENING SYSTEMS



W. E. Packard
Safety Manager

WEP:gj
Enclosures

D8130-13833 to
LAB. No. 13837 incl.

CITY OF LOS ANGELES
DEPARTMENT OF GENERAL SERVICES
STANDARDS

2319 DORRIS PLACE
LOS ANGELES, CA 90031
485-2242

REC'D 6-13-84
REPT'D 6-14-84
TO Mr. William Jones

L.A. County Hazardous Wastes Section
2615 S. Grand Ave., Room 607
Los Angeles, Ca. 90007

cc: Mr. Michael Miller
Bureau of Sanitation

NITRATE TESTS

Two samples of liquids and three samples of solids were tested for Los Angeles County at the request of Mr. Miller.

From: Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, Ca.

Sampled by: Jones & Bishop


Tests were made with an Orion Specific Ion Meter and a nitrate specific ion electrode.

IDENTIFICATION OF SAMPLES

<u>Sample No.</u>	<u>Marked</u>	<u>Type</u>	<u>Description</u>
1	TW 483-84	Liquid	Pond on SW corner plant, off site, North of RR tracks
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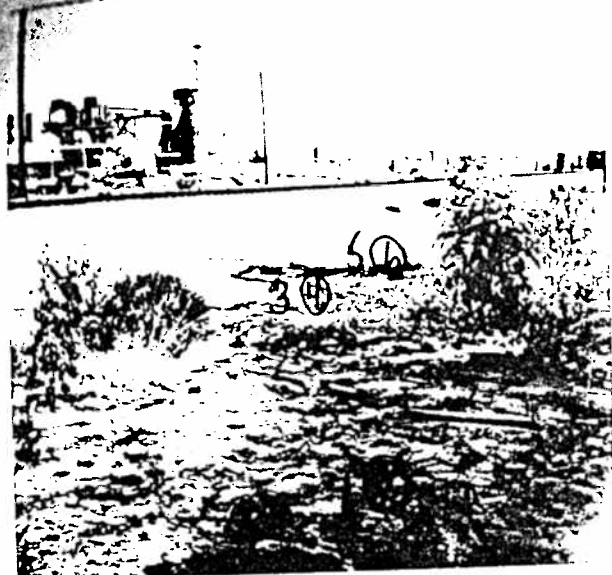
TEST DATA

<u>Sample No.</u>	<u>Nitrates</u>
1	4,100 MG/L
2	38,990 MG/KG, as received basis
3	920,000 MG/L
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5	28 MG/KG, as received basis


MASARU ITO, Division Head
General Services/Standards

MI:NUK:my

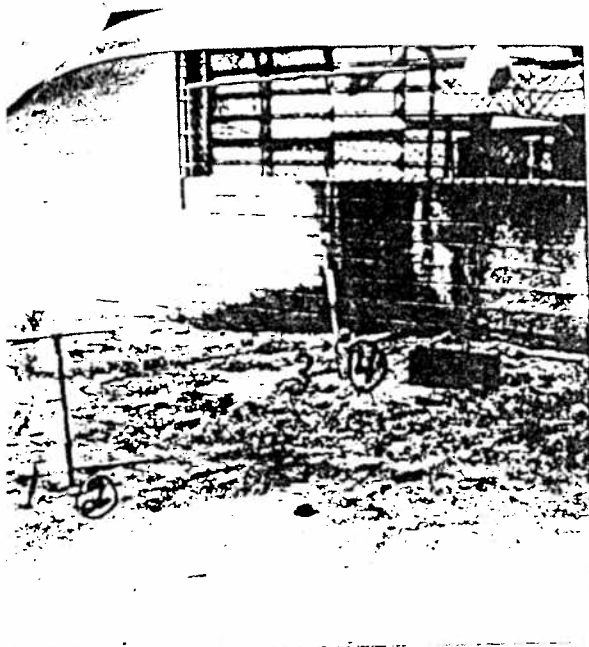
4832412



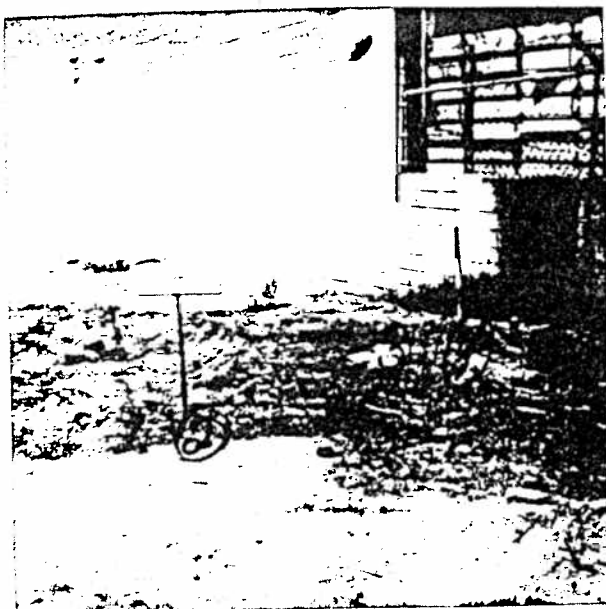
1, 3, 5 SURFACE
2, 4, 6 - 3' DEPTH



1, 3, 5 - SURFACE
2, 4, 6 - 3' DEPTH



OIL SOIL
1- SURFACE
2- 3' DEPTH



OIL SOIL
3- SURFACE
4- 3' DEPTH

Sample Identity

Page 1

- 1 - #1 Surface Path
- 2 - #2 3' Depth - Surface Path
- 3 - #3 Surface - South side of pooling area
- 4 - #4 3' Depth - South side of pooling area
- 5 - #5 Surface - North side of pooling area
- 6 - #6 3' Depth - North side of pooling area
- 7 - Oil Soil #1 - Surface
- 8 - Oil Soil #2 - Depth 3'
- 9 - Oil Soil #3 - Surface
- 10 - Oil Soil #4 - Depth 3'



GERALD L. DELKER, Ph.D.
Research Chemist
Supervisor

ANALYTICAL RESEARCH LABORATORIES, INC.
160 Taylor Street, Monrovia, Calif. 91016 (213) 357-3247

Mercury

Mercury Aerospace Fasteners Facility
11800 Sherman Way
North Hollywood, Ca. 91609

Metal, mg/kg

Sample	pH	Arsenic	Copper	Cadmium	Chromium	Lead	Mercury
①	8.8		475. #	31.5	680.	48.	
2	5.7		96.	1.5	9.0	5.0	
③	8.5		650. #	38.	310.	30.	
4	7.9		25.	0.8	13.4	8.0	
⑤	8.3		1550. #	91.	750.	5.0	
6	7.5		25.	1.7	7.2	7.0	
⑦	6.9		625. #	39.	320.	122.	
8	8.1		11.	0.7	8.6	8.0	
⑨	8.2		3700. #	220. #	1350.	76.	
10	6.6		52.	4.8	16.9	8.0	
action Limit			1.	0.2	0.5	5.	
M TTLC		500.	(2500)	100.	2500.	1000.	20.

	Nickel	Selenium	Thallium	Zinc	
1	375.		<5.	215.	
2	24.		<5.	34.	
3	270.		<5.	180.	
4	35.		<5.	53.	
5	612.		<5.	360.	
6	20.		<5.	61.	
7	221.		<5.	450.	# - Exceeds TTLC
8	38.		<5.	36.	
9	1040.		13.	1600.	
10	37.		<5.	44.	
action Limit	5.		5.	0.1	
M TTLC	2000.	100.	700.	2500.	

D8130-13833 to
13837 incl.

CITY OF LOS ANGELES

No. DEPARTMENT OF GENERAL SERVICES

D 6-13-84

STANDARDS

T'D 6-14-84

2319 DORRIS PLACE
LOS ANGELES, CA 90031

Mr. William Jones

485-2242

L.A. County Hazardous Wastes Section

2615 S. Grand Ave., Room 607

Los Angeles, Ca. 90007

cc: Mr. Michael Miller
Bureau of Sanitation

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MASARU ITO, Division Head
General Services/Standards

MI: NJK: my



COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

313 NORTH FIGUEROA STREET • LOS ANGELES, CALIFORNIA 90012



PUBLIC HEALTH PROGRAMS

DOUGLAS R. STEELE
Deputy Director

MARTIN D. FINN, M.D., M.P.H.
Medical Director

Reply refer to:
2615 South Grand Avenue, Room 607
Los Angeles, CA 90007
(213) 744- 3235

June 28, 1984

Microdot Aerospace Fastening Systems
P.O. Box 3001
Fullerton, CA

Attention William Packard, Safety-Security Manager

Dear Mr. Packard:

HAZARDOUS WASTE CLEANUP - MERCURY AEROSPACE FASTENERS
11800 Sherman Way, No. Hollywood, CA 91609

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Very truly yours,

Anastacio Medina
Anastacio G. Medina, Chief
Hazardous Waste Control Program

WJ:bp

cc: Mercury Aerospace Fasteners, Art Mulloy, Plant Mgr.

980329

HAZARDOUS WASTE MANIFEST

Department of Health Services

STATE ID NUMBER

83473017

William (Bill) Packard
Safety-Security Manager

01005

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

CHANCELLOR & OGDEN
800 WEST 15th STREET
LONG BEACH, CA 90813

(213) 432-8461

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

VEH/CONTAINER NO

EPA ID NUMBER

VEH/CONTAINER NO

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY

BKK LANDFILL
2210 South Azusa Avenue
West Covina, CA 91791

AREA CODE/PHONE NUMBER

(818) 963-0911

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO.	WASTE CAT. NO.	DIS. MET
Hazardous Waste	HA 11270			0180221		

COMPONENTS	CONC. RANGE		UNITS	
	UPPER	LOWER	%	PPM
Solvent	0.5	0.1		
Kerosene	0.4	0.1		
Tri-Ethane III	0.4	0.1		
Machine oil	10.0	2.0		

SPECIAL HANDLING INSTRUCTIONS

USE GLOVES AND GOGGLES

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature **ARTHUR R. MULLOY**

MO. 07 DAY 02 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSD must complete waste number.

See instructions

Printed or typed full name and signature

EPA ID NUMBER

DATE RECEIVED & ACCEPTED

EPA ID NUMBER MO. DAY YR.
RAD067786749 07 02 84

STATE ID NUMBER **83435336**

Print or type with ELITE type (12 characters per inch)

GENERATOR NAME AND MAILING ADDRESS
Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, CA. 91609

(818) 982-4800

01005

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

CA-X000083618

AREA CODE/PHONE NUMBER

TRANSPORTER NO 1
Falcon Disposal
3031 East "I" Street
Wilmington, CA. 90744

VEH CONTAINER NO

EPA ID NUMBER

CAD000004893

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

PRECANTS TRUCKING
11070 PINE ST.

LYNWOOD CA. (213) 638 2584

VEH/CONTAINER NO

EPA ID NUMBER

43871

43870

CAD04860402

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY

Box Landfill
2210 Azusa Ave.
West Covina, CA. 91791

(213) 965-0911

CAD06778674

AREA CODE/PHONE NUMBER

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS

UN/NA
NUMBER

TOTAL
QUANTITY

UNIT
WT/VOL

CONTAINER
NO TYPE

WASTE
CAT. NO ME

Hazardous Waste Solids, H.O.S. ORM-E

HA918920

Y

01

DT6110

COMPONENTS

CONC. RANGE
UPPER LOWER

UNITS
% PPM

HAZARDOUS WASTE SOLIDS

(SEE ATTACHED SHEETS)

SPECIAL HANDLING INSTRUCTIONS

Gloves & goggles. Load must be covered for transporting.

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature

MO. DAY YR
07 03 07

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO. DAY YR
07 03 07

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO. DAY YR
07 03 84

DISCREPANCY INDICATION SPACE

Facility owner or operator. Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSD/F must complete waste number. See instructions

EPA ID NUMBER

DATE RECEIVED & ACCEPTED

Printed or typed full name and signature

CAD06778674

MO. DAY YR
07 03 84

TSD/F RETAINS

83-87967

UNIFORM HAZARDOUS WASTE MANIFEST

FORM NO. DHS-8022A 3-84

STATE ID NUMBER

83657286

NAME AND MAILING ADDRESS

Aerospace Fasteners
13800 Sherman Way
North Hollywood, CA. 91609

AREA CODE/PHONE NUMBER

(818) 982-4800

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

CIA X 0 0 0 0 8 3 6 1 8

TRANSPORTER NO. 1 NAME AND MAILING ADDRESS

Falcon Disposal
3031 East "I" Street
Wilmington, CA. 90744

VEH/CONTAINER NO

EPA ID NUMBER

CIA ID 0 0 0 0 4 8 9 3 4

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

11111 11111 11111
11111 11111 11111
11111 11111 11111
11111 11111 11111

VEH/CONTAINER NO

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY

BKK Landfill
2210 Azusa Ave.
West Covina, CA. 91791

AREA CODE/PHONE NUMBER

(213) 965-0911

CIA ID 0 6 7 7 8 6 7 4 5

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS

UN/NA
NUMBERTOTAL
QUANTITYUNIT
WT/VOLCONTAINER
NO. TYPEWASTE
CAT. NO. MET

Hazardous waste, solids N.O.S. ORM-E

NA 9189

20

Y

03

DT

611

COMPONENTS

CONC. RANGE
UPPER LOWERUNITS
% PPM

SPECIAL HANDLING INSTRUCTIONS

Gloves & goggles. Load must be covered for transporting.

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Printed or typed full name and signature

MO.

DAY

YR

07

03

84

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO.

DAY

YR

07

06

84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO.

DAY

YR

07

03

84

DISCREPANCY INDICATION SPACE

Facility owner or operator. Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSD must complete waste number. See instructions.

DATE RECEIVED & ACCEPTED

EPA ID NUMBER

MO.

DAY

YR

Printed or typed full name and signature

07

03

84

or type with ELITE type (12 characters per inch).

STATE ID NUMBER83435897

GENERATOR NAME AND MAILING ADDRESS
Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, CA. 91609
AREA CODE/PHONE NUMBER (818) 982-4800

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAZ0000083618

TRANSPORTER NO 1
Falcon Disposal
3031 East "I" Street
Wilmington, CA. 90744
TRANSPORTER NO 2/ALTERNATE TSD FACILITY
RODOLF TATE TRUCKING
AREA CODE/PHONE NUMBER (213) 295-5155

VEH/CONTAINER NO.
EPA ID NUMBER
C A D 0 0 0 0 0 4 8 9 3

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
Ear Landfill
2210 Azusa Ave.
West Covina, CA. 91791
AREA CODE/PHONE NUMBER (213) 965-0911

VEH/CONTAINER NO.
EPA ID NUMBER
42422
424221 C A D 0 4 0 9 4 3 4 0 5

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO	WASTE CAT. NO	DISP. MET.
Hazardous Waste Solids, H.O.S. ORM-X	HA 918920	20	Y	01	DT 611	03

COMPONENTS	CONC RANGE		UNITS	
	UPPER	LOWER	%	PPM
Hazardous waste solid (see attached sheet)				
(Pup) with crushed drums solid				
water - solvent - oil -				

SPECIAL HANDLING INSTRUCTIONS
Gloves & goggles. Load must be covered for transporting.

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature
MO. 07 DAY 03 YR. 84

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
BIL BURNS
Printed or typed full name and signature
DATE REC'D & ACCEPTED
MO. 07 DAY 03 YR. 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
LHAR TATE
Printed or typed full name and signature
DATE REC'D & ACCEPTED
MO. 07 DAY 03 YR. 84

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSD must complete waste number. See instructions.

Printed or typed full name and signature
EPA ID NUMBER
DATE RECEIVED & ACCEPTED
MO. 07 DAY 03 YR. 84

Print or type with ELITE type (12 characters per inch).

STATE ID NUMBER

83657285

GENERATOR NAME AND MAILING ADDRESS

Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, CA. 91609

AREA CODE/PHONE NUMBER (818) 982-4800

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

C1A X 0 0 0 0 0 8 3 6 1 1 8

TRANSPORTER NO. 1 NAME AND MAILING ADDRESS

Falcon Disposal
3031 East "I" Street
Wilmington, CA. 90744

VEH/CONTAINER NO

EPA ID NUMBER

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

ROCKO TATE TRUCKING

(213) 2955155

VEH/CONTAINER NO

EPA ID NUMBER

C1A D 0 0 0 0 0 4 8 9 3

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY

BKK Landfill
2210 Azusa Ave.
West Covina, CA. 91791

AREA CODE/PHONE NUMBER (213) 965-0911

VEH/CONTAINER NO

EPA ID NUMBER

C1A D 0 6 7 7 8 6 7 4 K

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS

UN/NA
NUMBER

TOTAL
QUANTITY

UNIT
WT/VOL

CONTAINER
NO. TYPE

WASTE
CAT NO

DISP
METH

Hazardous Waste Solids, N.O.S. ORM-E

H A 9 1 8 9

2 0 1

Y

0 1 1

D 1 T 6 1 1 1

COMPONENTS

CONC. RANGE

UPPER

LOWER

UNITS

%

PPM

Silt Dirt (Dirt 99%) (1% oil)

SPECIAL HANDLING INSTRUCTIONS

Gloves & goggles. Load must be covered for transporting

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature

MO.

DAY

YR

9 7

1

1

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO.

DAY

YR

9 7

13

14

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO.

DAY

YR

9 7

13

14

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSD Facility must complete waste number. See instructions

Printed or typed full name and signature

EPA ID NUMBER

DATE RECEIVED & ACCEPTED

MO.

DAY

YR

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13

14

TSD RETAINS

UNIFORM HAZARDOUS WASTE MANIFEST

Print or type with ELITE type (12 characters per inch)

STATE ID NUMBER 83435894

GENERATOR NAME AND MAILING ADDRESS

Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, CA. 91609

AREA CODE/PHONE NUMBER

(818) 982-4800

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

CAX000083618

TRANSPORTER NO. 1

Falcon Disposal
3031 East "I" Street
Wilmington, CA. 90744

VEH/CONTAINER NO.

EPA ID NUMBER

CAD00004893

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

WILSONS TRUCKING
11070 PINE ST.
LYNWOOD, CA. 91203-2584

VEH/CONTAINER NO.

EPA ID NUMBER

CAD0000402

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY

WKK Landfill
2210 Azusa Ave.
West Covina, CA. 91791

AREA CODE/PHONE NUMBER

(213) 965-0911

EPA ID NUMBER

CAD06778674

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS

UN/NA
NUMBER

TOTAL
QUANTITY

UNIT
WT/VOL

CONTAINER
NO TYPE

WASTE
CAT. NO ME

Hazardous Waste, Solid, H.O.S. ORM-E

HA9189

20

Y 02

D T

6,11

COMPONENTS

CONC RANGE

UPPER

LOWER

UNITS

%

PPM

HAZARDOUS WASTE SOLID

SEE ATTACHED SHEETS

SPECIAL HANDLING INSTRUCTIONS

Gloves & goggles, load must be covered for transporting.

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature

MO. 07 DAY 03 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

BILL BURNS Bill Burns

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO. 07 DAY 03 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

GARY SCHULTZ Gary Schultz

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO. 07 DAY 03 YR 84

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSD must complete waste number.

Printed or typed full name and signature

EPA ID NUMBER

DATE RECEIVED & ACCEPTED

MO. 07 DAY 03 YR 84



COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES



313 NORTH FIGUEROA STREET • LOS ANGELES, CALIFORNIA 90012

PUBLIC HEALTH PROGRAMS

DOUGLAS R. STEELE
Deputy Director

MARTIN D. FINN, M.D., M.P.H.
Medical Director

RECEIVED

AUG 6 - 1984

Reply refer to:
2615 South Grand Avenue, Room 607
Los Angeles, CA 90007
(213) 744- 3235

HAZARDOUS WASTE
CONTROL PROGRAM

July 23, 1984

State of California
Secretary of State
1230 'J' Street
Sacramento, California 95814

Dear Madam:

In connection with our Criminal Cases involving court or jury trials we are required to show to the court a certified copy or copies of Articles of Incorporation, Amendments, and Statement of Officers, for corporations located within the State of California.

We, therefore, are requesting certified copies of these documents on the corporation(s) listed below:

Microdot, Inc.
P.O. Box 3001
Fullerton, California 92634-3001

Thank you for your corporation in this matter.

Very truly yours,

Anastacio G. Medina 28

Anastacio G. Medina, Chief
Hazardous Waste Control Program

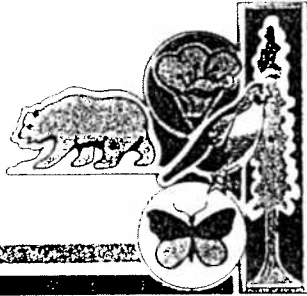
AGM:WJ:s

SECRETARY OF STATE

JUL 27 1 42 PM '84

RECEIVED
SAFETY DIVISION

msh
6-3-74
715624
Fougn



State of California

OFFICE OF THE SECRETARY OF STATE

I, *MARCH FONG EU*, Secretary of State of the State of California, hereby certify:

That the annexed transcript was prepared by and in this office from the record on file, of which it purports to be a copy, and that it is full, true and correct.

IN WITNESS WHEREOF, I execute
this certificate and affix the Great
Seal of the State of California this

JUL 30 1984



March Fong Eu

Secretary of State

Filed with County Clerk

Filed with Secy. of State

County

CALIFORNIA

61-1000

FILED

In the Office of the Secretary of State
of the State of California

ARTICLES OF INCORPORATION

OF

DEC 29 1970

Secretary of State

Deputy

ONE: The name of this corporation is

MERCURY AIRSPACE FASTENERS, INC.

TWO: The purposes for which this corporation is formed are:

(a) The specific business in which the corporation is primarily to engage is all activities relating to the manufacture and distribution of precision fasteners, and other related products.

(b) To manufacture, fabricate, assemble, to take, purchase and otherwise acquire, own, hold, use, sell, assign, transfer, exchange, lease and otherwise dispose of, and to invest, trade, deal in and deal with goods, wares, and merchandise and supplies and all other personal property of every class and description.

(c) To purchase, acquire, own, hold, use, lease (either as lessor or lessee), grant, sell, exchange, subdivide, mortgage, convey in trust, manage, improve, construct, operate and generally deal in any and all real estate, improved or unimproved, stores, office buildings, dwelling houses, apartment houses, hotels, manufacturing plants and other buildings, and any and all other property of every kind or description, real, personal and mixed, and wheresoever situated, either in California, other states of the United States, the District of Columbia, territories and colonies of the United States, or foreign countries.

(d) To acquire, by purchase or otherwise, the goodwill, business, property rights, franchises and assets of every kind, with or without undertaking, either wholly or in part, the liabilities of any person, firm, association or corporation; and to acquire any property or business as a going concern or otherwise (1) by purchase of the assets thereof wholly or in part, (2) by acquisition of the shares or any part thereof, or (3) in any manner, and to pay for the same in cash or in shares or bonds or otherwise evidences of indebtedness of this corporation, or otherwise; to hold, maintain and operate, or in any manner dispose of, the whole or any part of the goodwill, business, rights and property so acquired, and to conduct in any lawful manner the whole or any part of any business so acquired; and to exercise all the powers necessary or convenient in and about the management of such business.

to take, purchase, and otherwise acquire, own, hold, use, sell, assign, transfer, exchange, distribute and otherwise dispose of letters patent of the United States or any foreign country, patent rights, licenses and privileges, inventions, improvements and processes, copyrights, trademarks and trade names, and governmental, state, territorial, county and municipal grants and concessions of every character which this corporation may deem advantageous in the prosecution of its business or in the maintenance, operation, development or extension of its properties.

(f) To enter into, make, perform and carry out contracts of every kind for any lawful purpose without limit as to amount, with any person, firm, association or corporation, municipality, county, parish, state, territory, government or other municipal or governmental subdivision.

(g) To become a partner (either general or limited or both) and to enter into agreements of partnership, with one or more other persons or corporations, for the purpose of carrying on any business whatsoever which this corporation may deem proper or convenient in connection with any of the purposes herein set forth or otherwise, or which may be calculated, directly or indirectly, to promote the interests of this corporation or to enhance the value of its property or business.

(h) From time to time to apply for, purchase, acquire by assignment, transfer or otherwise, exercise, carry out and enjoy any benefit, right, privilege, prerogative or power conferred by, acquired under or granted by any statute, ordinance, order, license, power, authority, franchises, commission, right or privilege which any government or authority or governmental agency or corporation or other public body may be empowered to enact, make or grant; to pay for, aid in, and contribute toward carrying the same into effect and to appropriate any of this corporation's shares, bonds and/or assets to defray the costs, charges and expenses thereof.

(i) To subscribe or cause to be subscribed for, and to take, purchase and otherwise acquire, own, hold, use, sell, assign, transfer, exchange, distribute and otherwise dispose of, the whole or any part of the shares of the capital stock, bonds, coupons, mortgages, deeds of trust, debentures, securities, obligations, evidences of indebtedness, notes, goodwill, rights, assets and property of any and every kind, or any part thereof, of any other corporation or corporations, association or associations, firm or firms, or person or persons, together with shares, rights, units or interest in, or in respect of, any trust estate, now or hereafter existing, and whether created by the laws of the state of California or of any other state, territory or country; and to operate, manage and control such properties, or any of them, either in the name of such other corporation or corporations or in the name of this corporation, and while the owners of any of said shares of capital stock to exercise all the rights, powers and privileges of ownership of every kind and description, including the right to vote thereon, with power to designate some person or persons for that purpose from time to time, and to the same extent as natural persons might or could do.

to promote or to aid in any manner, financially or otherwise, any person, firm, corporation or association in which any shares of stock, bonds, notes, debentures, or other securities or evidences of indebtedness are held directly or indirectly by this corporation; and for this purpose to guarantee the contracts, dividends, shares, bonds, debentures, notes and other obligations of such other persons, firms, corporations or associations; and to do any other acts or things designed to protect, preserve, improve or enhance the value of such shares, bonds, notes, debentures or other securities or evidences of indebtedness.

(k) To borrow and lend money, but nothing herein contained shall be construed as authorizing the business of banking, or as including the business purposes of a commercial bank, savings bank or trust company.

(l) To issue bonds, notes, debentures or other obligations of this corporation from time to time for any of the objects or purposes of this corporation, and to secure the same by mortgage deed of trust, pledge or otherwise, or to issue the same unsecured; to purchase or otherwise acquire its own bonds, debentures or other evidences of its indebtedness or obligations; to purchase, hold, sell, and transfer the shares of its own capital stock to the extent and in the manner provided by the laws of the State of California as the same are now in force or may be hereafter amended.

(m) To purchase, acquire, take, hold, own, use and enjoy, and to sell, lease, transfer, pledge, mortgage, convey, grant, assign, or otherwise dispose of, and generally to invest, trade, deal in and with oil royalties, mineral rights of all kinds, mineral bearing lands and hydrocarbon products of all kinds, oil, gas and mineral leases, and oil rights and interests therein, and in general products of the earth and deposits, both subsoil and surface, of every nature and description.

(n) To carry on any business whatsoever, either as principal or agent or both or as a partnership, which this corporation may deem proper or convenient in connection with any of the foregoing purposes or otherwise, in which may be calculated directly or indirectly to promote the interests of this corporation or to enhance the value of its property or business; to conduct its business in this state, in other states; in the District of Columbia, in the territories and colonies of the United States and in foreign countries.

(o) To have and to exercise all the powers conferred by the laws of California upon corporations formed under the laws pursuant to and under which this corporation is formed, as such laws are now in effect or may at any time hereafter be amended.

The foregoing statement of purposes shall be construed as a statement of both purposes and powers, and the purposes and powers stated in each clause shall, except where otherwise expressed, be in nowise limited or restricted by reference to or inference from the terms or provisions of any other clause, but shall be regarded as independent purposes and powers.

THREE: The principal office for the transaction of the business of this corporation is to be located in the State of California, County of Los Angeles

FOUR: Authority is hereby granted to the holders of shares of this corporation, entitled to vote, to change from time to time the authorized number of directors of this corporation by a duly adopted amendment to the by-laws of this corporation.

FIVE: The number of directors of this corporation shall be three (3)

and the names and addresses of the persons who are hereby appointed to act as the first directors of this corporation are as follows:

<u>NAME</u>	<u>ADDRESS</u>
Salon J. Woodhouse	19217 Ludlow Street Northridge, Calif. 91324
Irving Birken	3462 South Vinton Avenue Los Angeles, Calif.
Salon J. Woodhouse	19217 Ludlow Street Northridge, Calif. 91324

SIX: This corporation is authorized to issue only one class of shares having a total number of 1,000 shares, each share shall be without par value.

SEVEN: Each shareholder or subscriber to shares of this corporation shall be entitled to full preemptive or preferential rights, as such rights have been heretofore defined at common law, to purchase and/or subscribe for his proportionate part of new shares which may be issued at any time by this corporation.

EIGHT: Before there can be a valid sale or transfer of any of the shares of the corporation by any holder thereof, he shall first offer said shares to the corporation and then to the other holders of the common shares in the following manner:

(a) Such offering shareholder shall deliver a notice in writing by mail or otherwise to the secretary of the corporation stating the price, terms and conditions of such proposed sale or transfer, the number of shares to be sold or transferred, and his intention so to sell or transfer such shares. Within fifteen (15) days thereafter, the corporation shall have the prior right to purchase all or any full number of such shares so offered at the price and upon the terms and conditions stated in such notice. Should the corporation fail to purchase all of said shares, at the expiration of said fifteen (15) day period, or prior thereto upon the determination of the corporation to purchase none or only a portion of such shares so offered, the secretary of the corporation shall, within five (5) days thereafter, mail or deliver to each of the other shareholders a notice setting forth the particulars concerning said shares not so purchased by the corporation described in the notice received from the offering shareholder. The other shareholders shall have the right to purchase all of the shares specified in said secretary's notice by delivering to the secretary by mail or otherwise a written offer or offers to purchase all or any specified number of such shares upon the terms so described in the secretary's notice if such offer or offers are so delivered to the secretary within ten (10) days after mailing or delivering such secretary's notice to such other shareholders. If the total number of shares specified in such offers so received within such period by the secretary exceeds the number of shares referred to in such secretary's notice, each offering shareholder shall be entitled to purchase such proportion of the shares referred to in said notice to the secretary, as the number of shares which he holds bears to the total number of shares held by all such shareholders desiring to purchase the shares referred to in said notice to the secretary.

(b) If all of the shares referred to in said notice to the secretary are not disposed of under such apportionment, each shareholder desiring to purchase shares in a number in excess of his proportionate share, as provided above, shall be entitled to purchase such proportion of those shares which remain thus undisposed of, subject to the provision of subparagraph (c) below, as the total number of shares which he holds bears to the total number of shares held by all of the shareholders desiring to purchase shares in excess of those to which they are entitled under such apportionment.

(c) If none or only a part of the shares referred to in said notice to the secretary is purchased, as aforesaid, by the corporation or in accordance with offers made by other shareholders within

said ten (10) day period, the shareholder desiring to sell or transfer may accept any subscriptions proffered or reject any or all such subscriptions only if such subscriptions are for less than all of the shares offered in the notice to the secretary. The offering shareholder thereafter may dispose of all shares of stock referred to in said notice to the secretary to any person or persons he may so desire; provided however, that he shall not sell or transfer such shares at a lower price or on terms more favorable to the purchaser or transferee than those specified in said notice to the secretary.

(d) Within the limitations herein provided, this corporation may purchase the shares of this corporation from any offering shareholder, provided however, that at no time shall this corporation be permitted to purchase all of its outstanding voting shares. Any sale or transfer or purported sale or transfer of the shares of this corporation shall be null and void unless the terms, conditions and provisions of this Article EIGHT are strictly observed and followed.

IN WITNESS WHEREOF, the parties hereto have set their
hands this 14th day of November, 1970.

[Signature]

[Signature]

[Signature]

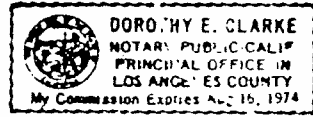
STATE OF CALIFORNIA)
COUNTY OF Los Angeles) ss.

On this 14th day of November, 1970 before me, the
undersigned, a Notary Public in and for the County of
State of California, personally appeared

[Signature]
[Signature]
[Signature]

known to me to be the persons whose names are subscribed to the
foregoing Articles of Incorporation, and acknowledged to me that
they executed the same.

[Signature]
Notary Public in and for the
County of
State of California





State of California

OFFICE OF THE SECRETARY OF STATE

I, *MARCH FONG EU*, Secretary of State of the State of California, hereby certify:

That the annexed transcript was prepared by and in this office from the record on file, of which it purports to be a copy, and that it is full, true and correct.

IN WITNESS WHEREOF, I execute
this certificate and affix the Great
Seal of the State of California this

AUG 11 1984



March Fong Eu

Secretary of State

State of Delaware



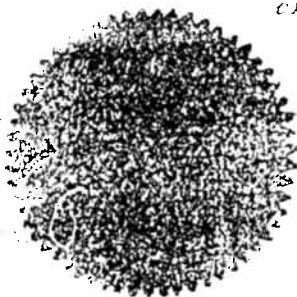
Office of Secretary of State

I, Robert H. Reed, Secretary of State of the State of Delaware,

do hereby certify that I am, by virtue of the laws of the State of Delaware, the custodian of the records of said State relating to the forfeiture or suspension of corporate charters, or the right of corporations to transact business in said State, and am the proper officer to execute this Certificate.

and I do hereby further certify that "CENTRAL ACQUIRING COMPANY", is a corporation duly incorporated under the laws of this State, having filed its original Certificate of Incorporation in this office the twenty-fourth day of May, A.D. 1974, at 9 o'clock A.M., and I do hereby further certify that the said "CENTRAL ACQUIRING COMPANY", issued a Certificate of Amendment changing its corporate title to "CENTRAL SCREW COMPANY", on the third day of June, A.D. 1974, at 9 o'clock A.M. and is in existence and by virtue of the laws of the State of Delaware said Corporation is at the date of this Certificate duly authorized to exercise all the powers recited in its Certificate of Incorporation and to transact business in said State.

In Testimony Whereof, I have hereunto set my hand
and official seal at Dover this third day
of June in the year of our Lord
one thousand nine hundred and seventy-four.



Robert H. Reed

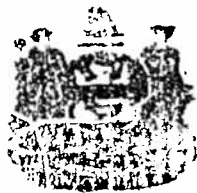
Robert H. Reed

Secretary of State

G. A. Bode

G. A. Bode

Asst. Secretary of State



State
of
DELAWARE

Office of SECRETARY OF STATE

I, Robert H. Reed, *Secretary of State of the State of Delaware,*

do hereby certify that the Certificate of Incorporation of the "CENTRAL ACQUIRING COMPANY", was received and filed in this office the twenty-fourth day of May, A.D. 1974, at 9 o'clock A.M.

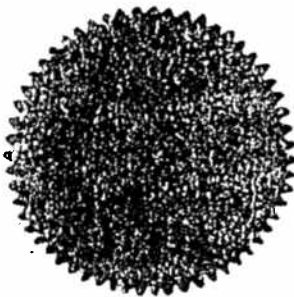
And I do hereby further certify that the said "CENTRAL ACQUIRING COMPANY", filed a Certificate of Amendment changing its corporate title to "CENTRAL SCREEN COMPANY", on the third day of June, A.D. 1974, at 9 o'clock A.M.

And I do hereby further certify that the said "CENTRAL SCREEN COMPANY", filed a Certificate of Agreement of Merger changing its corporate title to "MICRODOT MANUFACTURING INC.", on the thirty-first day of December, A.D. 1975, at 10 o'clock A.M.

And I do hereby further certify that the aforesaid Corporation is duly incorporated under the laws of the State of Delaware and is in good standing and has a legal corporate existence so far as the records of this office show and is duly authorized to transact business.

And I do hereby further certify that the said "MICRODOT MANUFACTURING INC.", is the last known title of record of the aforesaid Corporation.

In Testimony Whereof, *I have hereunto set my hand*
and official seal at Dover this fourth *day*
of March *in the year of our Lord*
one thousand nine hundred and seventy-six.

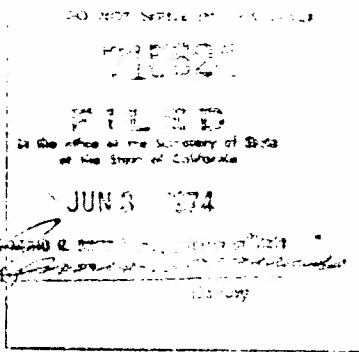


Robert H. Reed

Robert H. Reed

Secretary of State

Grover A. Noble Assistant Secretary of State



STATEMENT AND DESIGNATION BY FOREIGN CORPORATION

Central Acquiring Company
(Name of Corporation)

A corporation organized and existing under the laws of Delaware
(Name of place or state of incorporation), makes the following
statements and designation:

1. The location and address of its main office is 2530 Crescent Drive, Broadview,
Illinois 60153
(Insert complete address of principal business office wherever located—Do not use post office box)

2. The location and address of its principal office in the State of California is 1201
East MacArthur Street, Sonoma, California
(Insert complete address of principal business office in California—Do not use post office box)

3. The specific business it proposes to transact in the State of California is:
To buy, sell, import, export, manufacture, acquire, distribute
and generally to deal in and with fasteners and related supplies
and equipment and to engage in such activities as principal or as
agent.

4. (Use this paragraph if the process agent is a natural person.)

Jack Winningham

a natural person residing in the State of California, whose complete ☒ business ☐ residence address
is 600 State College Boulevard, Fullerton, California 92631
(Do not use post office box)

is designated as its agent upon whom process directed to the corporation may be served within the
State of California in the manner provided by law.

NOTE: Either the business address or the residence address must be given. Indicate which by
check mark in proper box.

THE SPENCER-HALL CORPORATION SYSTEM, INC.

organized and existing under the laws of Delaware

is designated as agent upon whom process directed to the undersigned corporation may be served in the State of California in the manner provided by law, and the undersigned corporation and its corporate agent has an office, as set forth in the certificate filed by the corporate agent pursuant to Section 3301.5 or 3301.8 (if a domestic corporation) or pursuant to section 6403.5 or 6403.6 (if a foreign corporation), California Corporations Code, at which the undersigned corporation may be served is Los Angeles

The undersigned corporation hereby irrevocably consents to service of process directed to it upon the agent designated above, and to service of process on the Secretary of State of California if the agent so designated or the agent's successor is no longer authorized to act or cannot be found at the address given.

Central Acquiring Company
(Name of Corporation)

By Robert J. Smith
(Title: Secretary)

INSTRUCTIONS

1. This statement must be signed by the president, a vice president, the secretary, an assistant secretary, or the treasurer of the corporation.

2. No domestic corporation may be designated as agent for service of process unless it has filed with the Secretary of State the certificate provided for by Section 3301.5, Corporations Code, and no foreign corporation may be designated unless it has qualified for the transaction of intrastate business in California and has filed with the Secretary of State or the State of California the certificate provided for by Section 6403.5, California Corporations Code.

3. There must be annexed to this statement a certificate by the public officer of the state or country having custody of the original articles or certificate of incorporation or of the act creating the corporation, or by a public officer authorized by the laws of such state or country to make such certificate, to the effect that the corporation making this statement is an existing corporation or organization standing in the state or country of its incorporation.

4. If the corporation is required to qualify under a D.B.A. (name other than true corporate name) pursuant to Section 6904, Corporations Code, then, in the first line of this statement set out the correct corporate name, followed by "which will do business in California as" setting forth the D.B.A. in the space indicated. The D.B.A. should not be set out in conjunction with the corporate name anywhere else in the statement.

5. If the corporation changes its name or its location, or any change in any of the statements made in this statement, then the corporation must file a new statement and designation, a form in which only be obtained from the Secretary of State.

NOTE: THIS SPACE IS RESERVED FOR THE FILING OFFICE.

DO NOT WRITE IN THIS SPACE

15624
1164206

FILED

In the Office of the Secretary of State
of the State of California

MAR 11 1976

JOSEFA LONG, CLERK OF STATE

[Signature]
Deputy

Amended Statement and Designation by Foreign Corporation

MICRODOT MANUFACTURING INC., a corporation
organized and existing under the laws of Delaware

and which is presently qualified for the
transaction of intrastate business in the State of California, makes the following statements and/or
designation:

1. That the name of the corporation has been changed to that hereinabove set forth and that
the name relinquished at the time of such change was CENTRAL SCREW COMPANY

2. That the location and address of its main office has been changed and the new location and
address of its main office is No Change

(Insert complete address of principal business office wherever located—Do not use post office box.)
3. That the location and address of its principal office in the State of California has been
changed to No Change

(Insert complete address of principal business office in California—Do not use post office box.)
4. The specific business it proposes to transact in the State of California has been changed and
the specific business it now proposes to transact in the State of California is No Change

No Change

1915749

Not Applicable

Not Applicable

☐ business ☐ residence address is

² *Ibid.* 124-25, 127-28, 130-31.

Note: Either the home or business address must be given. Indicate which by check mark in proper box.

Not Applicable

State our name of self in our video e-mail text address

MICRODOT MANUFACTURING INC.

Name of Corporation

By _____
Vice President

7.5

- NOTES**

DO NOT WRITE IN THIS SPACE

715624

445418

FILED

In the office of the Secretary of State
of the State of California

JUN 26 1974

EDMUND G. BROWN, Jr., Secretary of State

Edmund G. Brown, Jr.
Deputy

Amended Statement and Designation by Foreign Corporation

CENTRAL SCREW COMPANY, a corporation
organized and existing under the laws of Delaware

and which is presently qualified for the
transaction of intrastate business in the State of California, makes the following statements and/or
designation:

1. That the name of the corporation has been changed to that hereinabove set forth and that
the name relinquished at the time of such change was Central Acquiring Company

2. That the location and address of its main office has been changed and the new location and
address of its main office is NOT APPLICABLE

(Insert complete address of principal business office wherever located—Do not use post office box)

3. That the location and address of its principal office in the State of California has been
changed to NOT APPLICABLE

(Insert complete address of principal business office in California—Do not use post office box)

4. The specific business it proposes to transact in the State of California has been changed and
the specific business it now proposes to transact in the State of California is

NOT APPLICABLE

000327

5. The address of the agent designated for the service of process in the State of California has been changed to NOT APPLICABLE

(Do not use post office box)

6. (Use this paragraph if the new process agent designated hereby is a natural person.)
NOT APPLICABLE, a natural person residing in the State of California, whose complete ☐ business ☐ residence address is _____

(Do not use post office box)

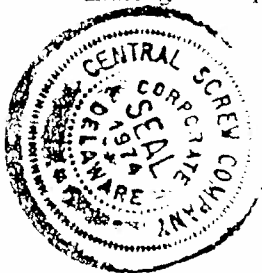
is hereby designated as its new agent upon whom process directed to the corporation may be served within the State of California, in the manner provided by law.

(Note: Either the business address or the residence address must be given. Indicate which by check mark in proper box.)

7. (Use this paragraph if the new process agent designated hereby is a corporation. See Instructions.)

NOT APPLICABLE, a corporation organized and existing under the laws of _____ is designated as new agent upon whom process directed to the undersigned corporation may be served within the State of California, in the manner provided by law. The name of the city, town or village wherein said corporate agent has an office, as set forth in the certificate filed by said corporate agent pursuant to Section 3301.5 or 3301.6 (if a domestic corporation) or pursuant to Section 6403.5 or 6403.6 (if a foreign corporation), California Corporations Code, at which the undersigned corporation may be served is _____

(State only name of city, town or village—no street or name)



CENTRAL SCREW COMPANY

(Name of Corporation)

By _____

Sam P. H. H.
(This)
Vice-President

INSTRUCTIONS

1. Use only whichever of the foregoing paragraphs of this Amended Statement are applicable.
2. If this Amended Statement shows a change of corporate name, there must be attached to this Amended Statement a certificate of the public officer having custody of the original corporation documents in the state or place of incorporation to the effect that such change of name was made in accordance with the laws of the state or place of incorporation.
3. No domestic or foreign corporation may be designated as agent for the service of process unless it has filed with the Secretary of State the certificate provided for by Sections 3301.5 or 3403.5, respectively, California Corporations Code.
4. For filing and recording this Amended Statement there is a fee of \$7.00.

NAME ENG. TO: WOODFAST, INC.

614290

ORIGINAL

AC 16365

FILED

In the Office of the Secretary of State
of the State of California

CERTIFICATE OF AMENDMENT
OF
ARTICLES OF INCORPORATION

MAR 17 1932

MARCH FONG ZU, Secretary of State

James E. Harris
Deputy

RALPH WOODHOUSE and BETSY WOODHOUSE do hereby certify:

1. That they are the President and Secretary, respectively, of MERCURY AEROSPACE FASTENERS, INC., a California corporation.

2. That the Board of Directors of this corporation has approved and adopted the following resolution by unanimous written consent without a meeting, as permitted by the By-laws of the corporation:

RESOLVED, that Article ONE of the Articles of Incorporation shall hereby be amended to read as follows:

"The name of this corporation is WOODFAST, INC."

3. That the Shareholders of the corporation have approved and adopted the resolution amending the Articles of Incorporation, as set forth in paragraph 2 above, by unanimous written consent without a meeting, as permitted by the By-laws of the corporation.

4. That the number of shares represented by said Shareholders' written consent is One Hundred (100). That the total number of shares entitled to vote on or consent to this amendment to the Articles of Incorporation is One Hundred (100).

Ralph E. Woodhouse
RALPH WOODHOUSE
President

Betsy Woodhouse
BETSY WOODHOUSE
Secretary

614

614 329

Each of the undersigned declares under penalty of perjury that the matters set forth in the foregoing certificate are true and correct.

Executed at Los Angeles, California, on the 12
day of March, 1932.

Ralph E. Woodhouse
RALPH WOODHOUSE

Betsy Woodhouse
BETSY WOODHOUSE

614200
D121688.

FILED
In the office of the Secretary of State
of the State of California

CERTIFICATE OF ELECTION TO
WIND UP AND DISSOLVE

JUN 21 1982
MARCELLINO E. Secretary of State
By [Signature] Deputy

RALPH WOODHOUSE and BETSY J. WOODHOUSE do hereby

certify:

1. That they are the duly elected and acting President and Secretary, respectively, of WOODFAST, INC., a California corporation.
2. That the corporation has elected to wind up and dissolve.
3. That said election was made by the written consent of the holders of One Hundred (100) shares of stock of the corporation, out of a total of One Hundred (100) outstanding shares entitled to vote on or consent to the election, representing one hundred percent (100%) of the voting power of the corporation.


[Signature]
RALPH WOODHOUSE
President

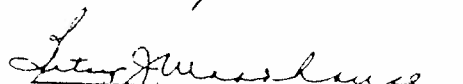
[Signature]
BETSY J. WOODHOUSE
Secretary

AR

10039

Each of the undersigned declares under penalty of perjury that the matters set forth in the foregoing certificate are true and correct. Executed at Los Angeles, California, on the 7th day of June, 1982.


RALEH WOODHOUSE


BETSY J. WOODHOUSE

5/8/290

D130852

CERTIFICATE OF DISSOLUTION

In the Office of the Secretary of State
of the State of California

DEC 22 1982

ARCHIVED

RALPH WOODHOUSE, LESTER E. BOND and BETSY J.

WOODHOUSE do hereby certify:

1. That they constitute a majority of the directors of WOODFAST, INC., a California corporation.
2. That the corporation has been completely wound up.
3. That the known debts and liabilities of the corporation have been actually paid.
4. That the corporation's known assets have been distributed to the Shareholders.
5. That the corporation is dissolved.

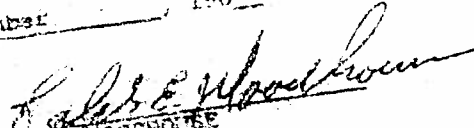
Ralph E. Woodhouse
RALPH WOODHOUSE

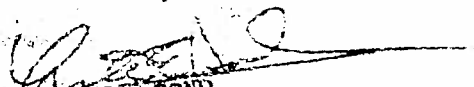
Lester E. Bond
LESTER E. BOND


Betsy J. Woodhouse
BETSY J. WOODHOUSE

8008377

Each of the undersigned declares under penalty of perjury that the matters set forth in the foregoing certificate are true and correct. Executed at Encino, California, on the 17th day of December, 1982.


RALPH WOODHOUSE


LESTER E. BOARD


BETSY WOODHOUSE

INC. FOR MICRODOT INC.

Amended
Statement and Designation
by Foreign Corporation

75624

DO NOT WRITE IN THIS SPACE

A277008

FILED

In the office of the Secretary of State
of the State of California

JAN 19 1984

MARCH FONG EN, Secretary of State

Deputy

MICRODOT INC.

_____, a corporation
organized and existing under the laws of Delaware
and which is presently qualified for the transaction of intrastate business in the State of California, makes
the following statements and/or designation:

1. That the name of the corporation has been changed to that hereinabove set forth and that the name
relinquished at the time of such change was MICRODOT MANUFACTURING INC.

2. That the address of its principal executive office has been changed and the new address of its
principal executive office is No change.

(Insert complete address of principal executive office (Do not use Post Office Box))

3. That the address of its principal office in the State of California has been changed to
No change.

(Insert complete address of principal office in California (Do not use Post Office Box))

FORM TO BE COMPLETED ON REVERSE SIDE

(OVER)

4. The address of the agent designated for the service of process in the State of California has been changed to No change.

(Do not use post office box)

5. (Use this paragraph if the new process agent designated hereby is a natural person.)
_____, a natural person residing in
the State of California, whose complete ☐ business ☐ residence address is _____

(Do not use post office box)

is hereby designated as its new agent upon whom process directed to the corporation may be served within the State of California, in the manner provided by law.

(Note: Either the business address or the residence address must be given. Indicate which by check mark in proper box.)

6. (Use this paragraph if the new process agent designated hereby is a corporation.)

NOTE: Before it may be designated by any foreign corporation as its agent for service of process, a corporate agent must comply with Section 1505, California Corporations Code. (See instruction 2.)

_____, a corporation
organized and existing under the laws of _____

is designated as new agent upon whom process directed to the undersigned corporation may be served within the State of California, in the manner provided by law.

MICRODOT INC.

(Name of Corporation)

Richard E. Gerhardt
(Signature of corporate officer)

Richard E. Gerhardt, Vice President

(Typed name and title of officer signing)

INSTRUCTIONS:

1. If this Amended Statement shows a change of corporate name, there must be attached to this Amended Statement a certificate of an authorized public official of the state or place of incorporation, that such change of name was made in accordance with the laws of that state or place.
2. No domestic corporation may be designated as agent for service of process unless it has filed with the Secretary of State the certificate provided for by Section 1505, Corporations Code, and no foreign corporation may be designated unless it has qualified for the transaction of intrastate business in California and has filed with the Secretary of State of the State of California the certificate provided for by Section 1505, California Corporations Code. A domestic or foreign corporation must be currently authorized to engage in business in this State and be in good standing status on the records of the Secretary of State of the State of California, in order to file a certificate pursuant to this section.

NOTE: A CORPORATION CANNOT ACT FOR ITSELF AS AGENT FOR SERVICE OF PROCESS.

3. For filing and recording this Amended Statement there is a fee of \$15.00

MICRODOT AEROSPACE FASTENING SYSTEMS
P.O. BOX 3001
FULLERTON, CA 92634-3001
H 714/871-1550 • TWX 910-592-1239 • TELEX 655367

HAZARDOUS WASTE MANIFEST

Department of Health Services

STATE ID NUMBER

83473017

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

William (Bill) Packard
Safety-Security Manager

01005

VEH/CONTAINER NO. EPA ID NUMBER

CHANCELLOR & OGDEN
800 WEST 15th STREET
LONG BEACH, CA 90813

(213) 432-8461

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

VEH/CONTAINER NO. EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY

EPA ID NUMBER

BKK LANDFILL
2210 South Azusa Avenue
West Covina, CA 91791
AREA CODE/PHONE NUMBER

(818) 965-0911

CAD06778674

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS

UN/NA
NUMBER

TOTAL
QUANTITY

UNIT
WT/VOL

CONTAINER
NO TYPE

WASTE
CAT. NO. MET

Hazardous Waste

HA1270

01R0221

COMPONENTS

CONC. RANGE
UPPER LOWER

UNITS
% PPM

Solvent

0.5

0.1

Kerosene

0.4

0.1

Tri-Ethane III

0.4

0.1

Machine oil

10.0

2.0

SPECIAL HANDLING INSTRUCTIONS

USE GLOVES AND GOGGLES

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature

ARTHUR R. MULLOY

MO.	DAY	YR.
07	02	84

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

DATE
REC'D
&
ACCEPTED

MO.	DAY	YR.

Printed or typed full name and signature

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

DATE
REC'D
&
ACCEPTED

MO.	DAY	YR.

Printed or typed full name and signature

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number See instructions.

Printed or typed full name and signature

DATE RECEIVED & ACCEPTED

EPA ID NUMBER

MO.	DAY	YR.
07	02	84

CAD06778674

Health and Welfare Agency
MANAGEMENT BRANCH

UNIFORM HAZARDOUS WASTE MANIFEST

Department

STATE ID NUMBER

83435896

or type with ELITE type (12 characters per inch)

GENERATOR NAME AND MAILING ADDRESS
Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, CA. 91609

(818) 982-4800

01005

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

CA-Y000083618

AREA CODE/PHONE NUMBER

TRANSPORTER NO. 1
Falcon Disposal
3031 East "I" Street
Wilmington, CA. 90744

VEH. CONTAINER NO

EPA ID NUMBER

CAD00004893

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

INCAITS TRUCKING
11070 PINE ST.

LYNWOOD CA. (213) 638-2584

VEH/CONTAINER NO

EPA ID NUMBER

43871

43870

CAD04860402

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY

Ind Landfill
2210 Azusa Ave.
West Covina, CA. 91791

(213) 965-0911

EPA ID NUMBER

CAD06778674

AREA CODE/PHONE NUMBER

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS

UN/NA
NUMBER

TOTAL
QUANTITY

UNIT
WT/VOL

CONTAINER
NO

WASTE
CAT. NO

DIS
ME

Hazardous Waste Solids, H.O.S. CRM-E

HA918920

Y

01

DT6110

COMPONENTS

CONC. RANGE

UPPER

LOWER

UNITS

% PPV

HAZARDOUS WASTE SOLIDS

(SEE ATTACHED sheets)

SPECIAL HANDLING INSTRUCTIONS

Gloves & goggles. Load must be covered for transporting.

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO. DAY YR
07 03 07

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO. DAY YR
07 03 84

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number.

DATE RECEIVED & ACCEPTED

EPA ID NUMBER

MO. DAY YR
07 07 84

CAD06778674

UNIFORM HAZARDOUS WASTE MANIFEST

FORM NO. DHS-8022A 3-84

STATE ID NUMBER

83657286

NAME AND MAILING ADDRESS

Aerospace Fasteners

13800 Sherman Way
North Hollywood, CA. 91609

AREA CODE/PHONE NUMBER

(818) 982-4800

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

C A X 0 0 0 0 8 3 6 1 8

TRANSPORTER NO. 1 NAME AND MAILING ADDRESS

Falcon Disposal
3031 East "I" Street
Wilmington, CA. 90744

VEH/CONTAINER NO

EPA ID NUMBER

C A D 0 0 0 0 4 8 9 3 4

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

11070 WINE ST.
LYNDHURST, CA. 91762

AREA CODE/PHONE NUMBER

(213) 965-0911

VEH/CONTAINER NO

EPA ID NUMBER

C A D 0 6 7 7 8 6 7 4 5

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY

BKK Landfill
2210 Azusa Ave.
West Covina, CA. 91791

AREA CODE/PHONE NUMBER

(213) 965-0911

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS

UN/NA
NUMBERTOTAL
QUANTITYUNIT
WT/VOLCONTAINER
NO.WASTE
CAT. NO.DISP
METH

Hazardous waste, solids N.O.E. ORM-E

NA 9189

20

Y

01

D1

611

COMPONENTS

CONC RANGE
UPPER LOWERUNITS
% PPM

SPECIAL HANDLING INSTRUCTIONS

Gloves & goggles. Load must be covered for transporting.

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature

MO

DAY

YR

07

03

84

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO

DAY

YR

07

02

84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO

DAY

YR

07

03

84

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSD must complete waste number. See instructions.

DATE RECEIVED & ACCEPTED

EPA ID NUMBER

MO

DAY

YR

07

03

84

WASTE MANAGEMENT BRANCH

UNIFORM HAZARDOUS WASTE MANIFEST

Sheet
CA 95814

or type with ELITE type (12 characters per inch).

STATE ID NUMBER

83435897

GENERATOR NAME AND MAILING ADDRESS

Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, CA. 91609

AREA CODE/PHONE NUMBER

(818) 982-4800

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

CAZ000083618

TRANSPORTER NO. 1

Falcon Disposal
3031 East "I" Street
Wilmington, CA. 90744

VEH/CONTAINER NO.

EPA ID NUMBER

CAD00004893

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

ROXCE TATE TRUCKING

VEH/CONTAINER NO.

EPA ID NUMBER

42422

42421

CAAD040943405

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY

PAK Landfill
2210 Azusa Ave.
West Covina, CA. 91791

AREA CODE/PHONE NUMBER

(213) 965-0911

EPA ID NUMBER

CAD06778674

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO	WASTE CAT. NO	DISP. MET.
Hazardous Waste Solids, H.O.S. ORM-X	HA918920		Y	01	DT611	03

COMPONENTS	CONC RANGE		UNITS	
	UPPER	LOWER	%	PPM
Hazardous waste solid (see attached sheet)				
(Pup) with crushed drums solid				
water - solvent - oil -				

SPECIAL HANDLING INSTRUCTIONS

Gloves & goggles. Load must be covered for transporting.

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature: *William James Pardo* MO: 07 DAY: 03 YR: 84

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

BILL BURNS *Bill Burns*

Printed or typed full name and signature

DATE REC'D & ACCEPTED

MO: 07 DAY: 03 YR: 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

LAMAR TATE *Lamar Tate*

Printed or typed full name and signature

DATE REC'D & ACCEPTED

MO: 07 DAY: 03 YR: 84

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSD must complete waste number. See instructions.

Printed or typed full name and signature: *Ben Sager*

EPA ID NUMBER

CAD067786749

DATE RECEIVED & ACCEPTED

MO: 07 DAY: 03 YR: 84

CA 95814

STATE ID NUMBER

83435895

it or type with ELITE type (12 characters per inch).

GENERATOR NAME AND MAILING ADDRESS
Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, CA. 91609

(818) 982-4800

01005

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

CAX000 083618

AREA CODE/PHONE NUMBER

TRANSPORTER NO. 1
Falcon Disposal
3031 East "I" Street
Wilmington, CA. 90744

VEH. CONTAINER NO

EPA ID NUMBER

CAD000004893

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

TYER TRUCKING
11165 CAUHANNA LN
CARLIN GROVE, CA. 92641

VEH/CONTAINER NO

EPA ID NUMBER

00053256 CAD98063840

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY

ISK Landfill
2210 Azusa Ave.
West Covina, CA. 91791

(213) 965-0911

CAD06778674

AREA CODE/PHONE NUMBER

PROPER U.S. DOT SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO	WASTE CAT NO	DI ME
Hazardous Waste Solids, H.O.S. ORM-E	NA918920		Y	01	DT6110	

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM
HAZARDOUS WASTE SOLIDS				
SEE ATTACHED SHEETS				

SPECIAL HANDLING INSTRUCTIONS

Gloves & goggles. Load must be covered for transporting.

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

William Edward Hefner

Printed or typed full name and signature

☐ Check if continuation sheet is used. Number of continuation sheets

MO	DAY	YR
07	03	84

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Bill Buras

Printed or typed full name and signature

DATE REC'D & ACCEPTED

MO	DAY	YR

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

M. TYER

Printed or typed full name and signature

DATE REC'D & ACCEPTED

MO	DAY	YR
07	03	84

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSD must complete waste number.

DATE RECEIVED & ACCEPTED

RAY SIMPSON

Printed or typed full name and signature

EPA ID NUMBER

MO	DAY	YR
07	03	84

Print or type with ELITE type (12 characters per inch).

STATE ID NUMBER

83657285

GENERATOR NAME AND MAILING ADDRESS Mercury Aerospace Fasteners 11800 Sherman Way North Hollywood, CA. 91609 AREA CODE/PHONE NUMBER (818) 982-4800		MANIFEST DOCUMENT NUMBER EPA ID NUMBER	
TRANSPORTER NO. 1 NAME AND MAILING ADDRESS Falcon Disposal 3031 East "I" Street Wilmington, CA. 90744		VEH /CONTAINER NO	EPA ID NUMBER
TRANSPORTER NO. 2/ALTERNATE TSD FACILITY WILCOE TATE TRAILING (213) 2955155		VEH /CONTAINER NO	EPA ID NUMBER
TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY BKK Landfill 2210 Azusa Ave. West Covina, CA. 91791 AREA CODE/PHONE NUMBER (213) 965-0911		EPA ID NUMBER	

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO.	WASTE CAT NO.	DISP METH
Hazardous Waste Solids, N.O.S. ORM-E	HA9189	20	Y	011	DIT611	

COMPONENTS	CONC. RANGE		UNITS	
	UPPER	LOWER	%	PPM
oil dirt (dirt 99%) (1% oil)				

SPECIAL HANDLING INSTRUCTIONS

Gloves & goggles. Load must be covered for transporting

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSD must complete waste number. See instructions

Printed or typed full name and signature

DATE RECEIVED & ACCEPTED

EPA ID NUMBER

MO.	DAY	YR
07	03	88

Health and Welfare Agency
SOLID WASTE MANAGEMENT BRANCH
14 P Street
Pomona, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

print or type with ELITE type (12 characters per inch)

STATE ID NUMBER

83435894

GENERATOR NAME AND MAILING ADDRESS

Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, CA. 91609

AREA CODE/PHONE NUMBER

(818) 982-4800

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

CA 9000083618

TRANSPORTER NO. 1

Falcon Disposal
3031 East "I" Street
Wilmington, CA. 90744

VEH/CONTAINER NO.

EPA ID NUMBER

CA 00004893

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

WILSONS TRUCKING
11070 PINE ST.
LYNNWOOD, CA. 212-638-2584

VEH/CONTAINER NO.

EPA ID NUMBER

411017
4401180 CA 007860402

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY

AK Landfill
2210 Azusa Ave.
West Covina, CA. 91791

AREA CODE/PHONE NUMBER

(213) 965-0911

EPA ID NUMBER

CA 006778674

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS

UN/NA
NUMBER

TOTAL
QUANTITY

UNIT
WT/VOL

CONTAINER
NO TYPE

WASTE
CAT. NO

Hazardous Waste, Solid, E.O.S. ORH-E

NA 9189

20

Y

02

D

T

6

1

1

COMPONENTS

CONC RANGE

UPPER

LOWER

UNITS

%

PPM

HAZARDOUS WASTE SOLID

SEE ATTACHED SHEETS

SPECIAL HANDLING INSTRUCTIONS

Gloves & goggles. Load must be covered for transporting.

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature

MO

DAY

YR

07

03

84

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

BILL BURNS Bill Burns

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO

DAY

YR

07

03

84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

GARY SCHULTZ Gary Schultz

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO

DAY

YR

07

03

84

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSD must complete waste number. See instructions.

DATE RECEIVED & ACCEPTED

EPA ID NUMBER

MO

DAY

YR

Printed or typed full name and signature

STATE OF DELAWARE
OFFICE OF SECRETARY OF STATE

I, GLENN C. KINTON, Secretary of State of the State of Delaware, do hereby certify that the Certificate of Incorporation of the "CENTRAL ACQUIRING COMPANY" was received and filed in this office the twenty-fourth day of May, A.D. 1974, at 9 o'clock A.M.

And I do hereby further certify that the said "CENTRAL ACQUIRING COMPANY", filed a Certificate of Amendment, changing its corporate title to "CENTRAL SCREW COMPANY", on the third day of June, A.D. 1974, at 9 o'clock A.M.

And I do hereby further certify that the said "CENTRAL SCREW COMPANY", filed a Certificate of Change of Agent and Location of Registered Office, on the seventeenth day of December, A.D. 1975, at 10 o'clock A.M.

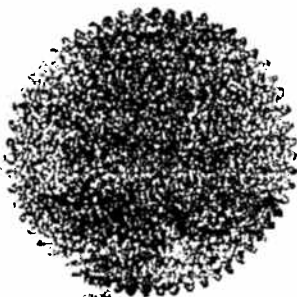
And I do hereby further certify that the said "CENTRAL SCREW COMPANY", filed a Certificate of Agreement of Merger, changing its corporate title to "MICRODOT MANUFACTURING INC.", on the thirty-first day of December, A.D. 1975, at 10 o'clock A.M.

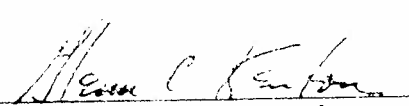
And I do hereby further certify that the said "MICRODOT MANUFACTURING INC.", filed a Certificate of Merger, changing its corporate title to "MICRODOT INC.", on the thirtieth day of December, A.D. 1983, at 3:25 o'clock P.M.

And I do hereby further certify that the aforesaid Certificates are the only Certificates on record of the aforesaid Corporation.

And I do hereby further certify that the aforesaid Corporation is duly incorporated under the laws of the State of Delaware and is in good standing and has a legal corporate existence not having been cancelled or dissolved so far as the records of this office show and is duly authorized to transact business.

IN TESTIMONY WHEREOF, I have hereunto set my hand
and official seal at Dover this sixth day
of January in the year of our Lord one
thousand nine hundred and eighty-four.




Glenn C. Kinton, Secretary of State

1460333



COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

313 NORTH FIGUEROA STREET • LOS ANGELES, CALIFORNIA 90012



PUBLIC HEALTH PROGRAMS

DOUGLAS R. STEELE
Deputy Director

MARTIN D. FINN, M.D., M.P.H.
Medical Director

Reply refer to
2615 South Grand Avenue, Room 607
Los Angeles, CA 90007
(213) 744-3235

August 9, 1984

Mr. Barry Groveman, Supervisor
Environmental Protection Section
Office of the City Attorney
City Hall East
200 North Main Street, Suite 1700
Los Angeles, California 90012

SUBJECT: REQUEST FOR COMPLAINT
MERCURY AEROSPACE FASTENERS
11800 SHERMAN WAY
NORTH HOLLYWOOD, CALIFORNIA 91609

Dear Mr. Groveman:

This Department has completed an investigation of the subject facility. I have enclosed copies of the report and investigative findings for your information.

Specifically, this Department found the subject company to be discharging hazardous wastes to an unauthorized location off the plant facility.

Pursuant to the authority vested in this Department by California Health and Safety Code, Section 25181, the City Attorney of Los Angeles is requested to file a complaint against Mercury Aerospace Fasteners and any other related parties.

If you should have any questions, please feel free to contact Mr. William Jones at (213) 744-3235.

Very truly yours,

Anastacio G. Medina
Anastacio G. Medina, Chief
Hazardous Waste Control Program

AGH:WJ:s

Enclosure

OFFICE OF
CITY ATTORNEY
CITY HALL EAST
LOS ANGELES, CALIFORNIA 90012



IRA REINER
CITY ATTORNEY
November 30, 1984

Ozzie Tarr
c/o Mercury Aerospace Fasteners, Inc.
11800 Sherman Way
North Hollywood, California 91609

Dear Sir:

Please be advised that a criminal complaint has been filed charging MERCURY AEROSPACE FASTENERS, INC.; OZZIE TARR, CO-DEFENDANT with violations of the CALIFORNIA HEALTH AND SAFETY CODE SECTION 25189.5(b).

You are hereby notified to appear for arraignment in Division 81 of the Arraignment Court located at 429 South Bauchet Street, Los Angeles, California on December 27, 1984, at 8:30 a.m.

You or an attorney representing you must appear at the time indicated. Failure to appear will result in the issuance of a bench warrant against you. If you are a corporation, you must be represented by an attorney. If you have any questions regarding this matter, please call (213) 485-6286.

Very truly yours,

IRA REINER, City Attorney

By


RICHARD KRAVETZ
Deputy City Attorney

Environmental Protection Section

RK :a

OFFICE OF
CITY ATTORNEY
CITY HALL EAST
LOS ANGELES, CALIFORNIA 90012



IRA REINER
CITY ATTORNEY
November 30, 1984

Mercury Aerospace Fasteners, Inc.
11800 Sherman Way
North Hollywood, California 91609

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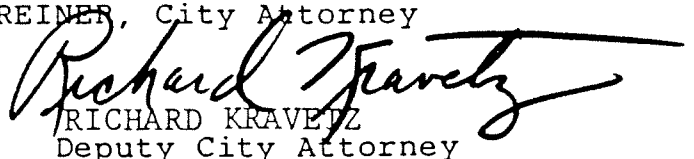
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Very truly yours,

IRA REINER, City Attorney

By


RICHARD KRAVETZ
Deputy City Attorney

Environmental Protection Section

RK :a

cc: OZZIE TARR, CO-DEFENDANT

CASE # 313113

COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES
ENVIRONMENTAL MANAGEMENT - HAZARDOUS WASTE CONTROL PROGRAM

us

PROSECUTION REPORT

DATE January 30, 1985 DATE ADJUDICATED January 24, 1985

INVESTIGATING OFFICERS William Jones

DEFENDANT Mercury Aerospace Fasteners

Ozzie Tarr, Co-defendant

ADDRESS 11800 Sherman Way, North Hollywood, CA

COMPANY NAME Same as Above

TYPE OF BUSINESS Mfr. aircraft fasteners

COURT Division 81 JUDGE Commissioner Crowder

COMPLAINT Unlawful discharge of hazardous wastes, to wit: copper,
nitric acid, oil and grease, to unauthorized locations (i.e., ground).

LAW OR ORDINANCE VIOLATED / SECTIONS 25189.5(b)

PLEA Guilty VERDICT Guilty

DISPOSITION Company fined \$20,000; clean-up costs \$12,000; 24 months
probation. Charges against co-defendant dropped.

ARRAIGNMENT DATE: DECEMBER 27, 1984

The People of the State of California,

DIVISION 81

8:30 A.M.

PLAINTIFF,

vs.

MERCURY AEROSPACE FASTENERS, INCORPORATED;
OZZIE TARR, CO-DEFENDANT

DEFENDANT(S).

MISDEMEANOR COMPLAINT

Filed.....

CLARK K. SAITO, Clerk

By.....

Deputy Clerk

Issued by

IRA REINER, City Attorney

By.....

Deputy City Attorney

RICHARD KRAVETZ

CALIFORNIA HEALTH & SAFETY CODE §25189.5(b)

Comes now the undersigned and states that he is informed and believes, and upon such information and belief declares: That on or about May 21, 1984, at and in the City of Los Angeles, in the County of Los Angeles, State of California, a misdemeanor to wit:

violation of CALIFORNIA HEALTH & SAFETY CODE §25189.5(b) - COUNT 1

was committed by MERCURY AEROSPACE FASTENERS, INCORPORATED;
OZZIE TARR, CO-DEFENDANT

(whose true name to affiant is unknown), who at the time and place last aforesaid,

did unlawfully at 11800 Sherman Way, Los Angeles, California, knowingly dispose of a hazardous or extremely hazardous waste, to wit: copper, or cause any such waste to be disposed of at a facility which does not have a permit from the Department issued pursuant to the provisions of the chapter, or at any point which is not authorized according to the provisions of the chapter.

COUNT 2

For a further, separate and 2nd cause of action, being a different offense belonging to the same class of crimes and offenses set forth in Count 1 hereof, affiant complains and says: That on or about the 21st day of May 1984, at and in Los Angeles, in the County of Los Angeles, State of California a misdemeanor, to wit:

violation of CALIFORNIA HEALTH & SAFETY CODE §25189.5(b)

was committed by MERCURY AEROSPACE FASTENERS, INCORPORATED;
OZZIE TARR, CO-DEFENDANT

(whose true name to affiant is unknown), who at the time and place last aforesaid,

did unlawfully at 11800 Sherman Way, Los Angeles, California, knowingly dispose of a hazardous or extremely hazardous waste, to wit: nitric acid, or cause any such waste to be disposed of at a facility which does not have a permit from the Department issued pursuant to the provisions of the chapter, or at any point which is not authorized according to the provisions of the chapter.

COUNT 3

For a further, separate and 3rd cause action, being a different offense belonging to the same class of crimes and offenses set forth in Count 1 - 2.. hereof, affiant complains and says: That on or about the 21st day May 1984, at and in Los Angeles, in the County of Los Angeles, State of California, a misdemeanor, to wit:

VIOLATION of CALIFORNIA HEALTH & SAFETY CODE SECTION 25189.5(b)

was committed by MERCURY AEROSPACE FASTENERS, INCORPORATED

(whose true name to affiant is unknown), who at the time and place last aforesaid,

did unlawfully at 11800 Sherman Way, Los Angeles, California, knowingly dispose of a hazardous or extremely hazardous waste, to wit: oil, or cause any such waste to be disposed of at a facility which does not have a permit from the Department issued pursuant to the provisions of the chapter, or at any point which is not authorized according to the provisions of the chapter.

All of which is contrary to the law and against the peace and dignity of the People of the State of California. Declarant and complainant therefore prays that a warrant may be issued for the arrest of said defendant(s) and that said defendant(s) may be dealt with according to law.

Attached hereto and incorporated herin by reference as though fully set forth are written statements and reports, which constitute the basis upon which I make the within allegations.

A Declaration in Support of the Issuance of Such Warrant is Submitted.

Executed at Los Angeles, California, on 11-30-84.

I declare under penalty of perjury that the foregoing is true and correct.

/ans

William Jones 11/30/84
Declarant and Complainant

ARRAIGNMENT DATE: DECEMBER 27, 1984
DIVISION 81
8:30 A.M.

WILLIAM JONES
HEALTH OFFICER
LOS ANGELES DEPARTMENT OF HEALTH SERVICES



COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

313 NORTH FIGUEROA STREET • LOS ANGELES, CALIFORNIA 90012



PUBLIC HEALTH PROGRAMS

Lawrence D. Roberts, Acting
County Director

ARTIN D. FINN, M.D., M.P.H.
Medical Director

Reply refer to:
2615 South Grand Avenue, Room 607
Los Angeles, CA 90007
(213) 744-3223

DATE: 4-29-86

TO: Ed Early ADDRESS: 11800 Sherman Way, N. Hollywood
SUBJECT: Mercury Aerospace Fasteners ADDRESS: 916

In order to comply with the State Health and Safety Code / California Administrative Code you are directed to take the following actions marked below.

- ☐ 1) Discontinue immediately the disposal of hazardous wastes () to unauthorized locations ()
- ☐ 2) Discontinue immediately the transport of hazardous wastes () off site except by a registered hazardous waste hauler, under manifest and to a State Health Department permitted facility.
- ☐ 3) Remove and legally dispose by , all hazardous wastes / contaminated materials discharged to / stored at . (NOTE: All hazardous waste transported off site by vehicle must be transported under Hazardous Waste Manifest, by a State Health Department registered hauler).
- ☐ 4) Provide this office by , a site assessment and decontamination plan for the above subject contaminated area.
- ☒ 5) Provide this office by 6-28-86, a photo copy of the completed manifest receipt used to dispose of waste trichloroethane
- ☐ 6) Store by , all hazardous waste in a secure, contained, weather proof and well posted manner pursuant to California Administrative Code, Title 22, Section 66508, 67120.
- ☐ 7) Store by , all hazardous waste in non-leaking, properly labeled and dated containers with tight fitting lids.
- ☐ 8) Discontinue the storage of hazardous waste / treatment of hazardous waste for longer than without written permission from the State Department of Health Services (213) 620-2380.
- ☐ 9) Maintain copies of all hazardous waste manifests and receipts at the above subject facility for agency review.
- ☐ 10) Obtain an EPA Number from the State Department of Health Services (213) 620-2380 (916) 324-1781 prior to transport of any hazardous waste off site.
- ☐ 11) Provide this office by , a copy of a hazardous materials contingency plan and employee training plan for the above subject facility pursuant to California Administrative Code, Title 22, Sections 67120 to 67145 and 67105.
- ☐ 12) Additional Requirements:

RECEIVED BY:

U.S. Mail

INSPECTOR:

Jerry Lile, R.S.

HAZARDOUS WASTE CONTROL PROGRAM
AEC 335A

COUNTY OF LOS ANGELES - PUBLIC HEALTH LICENSE APPLICATION

PLEASE PRINT

ACCT: 536619

DATE BUSINESS STARTED 042986
MO DAY YR

OWNER(S) NAME(S) KAYNAR COMPANY
LAST FIRST AND MIDDLE INITIAL

PARTNER(S)

LAST FIRST AND MIDDLE INITIAL

BUSINESS NAME MERCURY AEROSPACE FASTENERS

11800 SHERMAN WAY
CITY STATE ZIP CODE

ENDING NO

FRACTION

DIR

STREET

11800 SHERMAN WAY
CITY STATE ZIP CODE

11800 SHERMAN WAY
NUMBER AND STREET

MAILING ADDRESS

NORTH HOLLYWOOD CA 91605
CITY STATE ZIP CODE

Hazardous waste control
SIC NO. LICENSE NO. BUSINESS NO.

3490

818-982-4800

PREVIOUS ACCOUNT NUMBER IF ANY

Donna L. R. S.

101
BUSINESS CODE

13
DISTRICT CODE

FOR PAY COLLECTOR'S USE	
DUPLICATE FEE	\$
REPRODUCTION	\$
PENALTY	\$
PRINTER'S FEE	\$
PRINTER'S PEN	\$
PAY TOTAL	\$
FEE TOTAL	\$

COMPANY NAME: Measur Airspace Facilities SHEET: 11500 Sherman Way CITY & ZIP: Van Nuys 91411 DISTRICT: 1100
 CONTACT: Ed Early - V.P. PERSON IDENTIFIED & TITLE: Dale Bader PHONE NO. 818-950-4500 NO. EMPLOYEES: 100
 E.A. CO. FILE NO: 536619 EPA NO.: CA 00000215 EMERGENCY NO.: 100

TYPE OF FACILITY & DESCRIPTION OF OPERATION/PRODUCTS: Measur Airspace facilities manufacturing
 SAFETY SHOWER: Ø EATING AREA: Ø TOILET & WASHING FACILITIES ADEQUATE: YES
 PLANT SANITATION ADEQUATE: YES

HAZARDOUS WASTE

PROCESS	MATERIAL	TYPE	VOL. / LBS	STORAGE METHOD	DISPOSAL METHOD	MANIFEST	CONTROL	HAZ
<u>Asphalting</u> <u>Gravel</u> <u>Topsoil</u> <u>Good Portland</u> <u>Macadam</u> <u>Hot tar</u> <u>Sand</u> <u>Gravel</u>	<u>Topsoil</u> <u>Gravel</u> <u>Gravel</u> <u>Gravel</u> <u>Gravel</u> <u>Gravel</u> <u>Gravel</u> <u>Gravel</u>	<u>Gravel</u> <u>Gravel</u> <u>Gravel</u> <u>Gravel</u> <u>Gravel</u> <u>Gravel</u> <u>Gravel</u> <u>Gravel</u>	<u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u>	<u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u>	<u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u>	<u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u>	<u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u>	<u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u> <u>55 gal drums</u>

NUMBER OF UNDERGROUND STORAGE TANKS: Ø ACCESS TO STORM INLET ON PREMISES: YES NO X
 VOLUME & TYPE OF WASTE IN UNDERGROUND TANK(S): Ø CHLORINATED HYDROCARBON USED: YES NO X
 PRIVATE DISPOSAL SYSTEMS ON PREMISES: YES NO X SEWER CONNECTION ON PREMISES: YES NO X

REMARKS:

VIOLATIONS: None

grinding

Vapor Degreaser

no steam
drain

Treacher

55 gal drum - waste

storage

55 gal tanks

stock

600 gal - waste oil

20 sol.

≈ 3 mos.

Mercury Aerospace

~~11-14-85~~

grind oil

Ball - cutting - 2,55 g

Kaynar

grind oil -

Kerosene.

Thermostat oil

due load

Rochford Pacific Inc.

CAD 980737035

Mixed oils Comb.

275 gals.

manifest # 84469119

11-14-85

cooling Tower

Air

filter changed

Dale Barber

Sand Blast

Titanium

2 machines

St. Steel

Machines

Grind

Drill Press

Cold Headers

Threaders

Hot Forge

COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

313 NORTH FIGUEROA STREET • LOS ANGELES, CALIFORNIA 90012

RECEIVED

JUN 8 1986

PUBLIC HEALTH PROGRAMS

RECEIVED

MAY 15 1986

HAZARDOUS WASTE CONTROL PROGRAM

Reply refer to:
2515 South Grand Avenue, Room 607
Los Angeles, CA 90007
(213) 744-3223

D. Roberts, Acting
Director

D. FINN, M.D., M.P.H.
Director

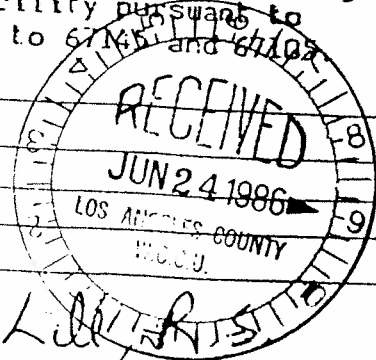
DATE: 4-29-86

ADDRESS: 11800 Sherman Way, N. Hollywood
ADDRESS: 91605

Ed Early
SUBJECT: Mercury Aerospace Fasteners

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- 2) Discontinue immediately the transport of hazardous wastes () off site except by a registered hazardous waste hauler, under manifest and to a State Health Department permitted facility.
- 3) Remove and legally dispose by , all hazardous wastes / contaminated materials discharged to / stored at . (NOTE: All hazardous waste transported off site by vehicle must be transported under Hazardous Waste Manifest, by a State Health Department registered hauler).
- 4) Provide this office by , a site assessment and decontamination plan for the above subject contaminated area.
- 5) Provide this office by 6-28-86 , a photo copy of the completed manifest receipt used to dispose of waste trichloroethane.
- 6) Store by , all hazardous waste in a secure, contained, weather proof and well posted manner pursuant to California Administrative Code, Title 22, Section 66503, 67120.
- 7) Store by , all hazardous waste in non-leaking, properly labeled and dated containers with tight fitting lids.
- 8) Discontinue the storage of hazardous waste / treatment of hazardous waste for longer than without written permission from the State Department of Health Services (213) 620-2380.
- 9) Maintain copies of all hazardous waste manifests and receipts at the above subject facility for agency review.
- 10) Obtain an EPA Number from the State Department of Health Services (213) 620-2380 or (916) 324-1781 prior to transport of any hazardous waste off site.
- 11) Provide this office by , a copy of a hazardous materials contingency plan and employee training plan for the above subject facility pursuant to California Administrative Code, Title 22, Sections 67120 to 67145 and 67102.
- 12) Additional Requirements:



MAILED BY: U.S. Mail

INSPECTOR: Jerry Little

HAZARDOUS WASTE CONTROL PROGRAM

APD 378 P

FX-6 Personal Privacy

8-25-80 from Mike Macross,
re. Mercury Aerospace, Inc.

1982 sold by Woodfast Inc. or Woodhouse
aka Mercury Aerospace Inc.

As 1981 - Son LACHS - says and some compliance

and to

Dec 9 1981 Purchase
Mar 12 1982 Close Escrow

Woodfast
Del. Corp.

8-25-80 → MICR00T

Harvey Jr. Woodfast Inc - Ralph Woodhouse
was being sued by MICR00T

1003385

(3) As to
Proceed
"If not
Rule
then

ANGER, GRAYSON, GIVNER & BOOKE
PARTNERSHIP INCLUDING PROFESSIONAL CORPORATIONS
16633 VENTURA BOULEVARD
SUITE 600
ENCINO, CALIFORNIA 91436
Telephone (818) 788-3720

FX-4 CBI Determined

FX-4 CBI Determined

90-3673
1220

PAY

THE SUM 40 DOLLARS

TO THE WILLIAM JONES
ORDER OF C/O CO. OF LOS ANGELES
DEPT. OF HEALTH SERVICES
2615 S. CRAND #607

DATE 9/22/86

\$ 40.00

FX-4 CBI Determined

DATE	INVOICE NO.	AMOUNT	DATE	INVOICE NO.	AMOUNT
	11-014536	40.00 - Witness Fee Woodhouse/Microdot			



2003/07



COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

313 NORTH FIGUEROA STREET • LOS ANGELES, CALIFORNIA 90012 • (213) 974-



Reply refer to:

2615 S. Grand Ave., Room 607
Los Angeles, CA 90007

October 17, 1986

Sanger, Grayson, Givner & Boone
16633 Ventura Blvd., Suite 600
Encino, CA 91436

Attention Michael Marcus, Attorney

Dear Mr. Marcus:

MICRODOT, INC. VS. WOODFAST, INC.

Enclosed please find the hand drawn map of the Mercury Aerospace facility at 11800 Sherman Way, North Hollywood, CA, and my recollection of where the hazardous waste discharges occurred.

Please inform me as soon as possible the date you wish to take a deposition from me. Be reminded that from the second week in November through the first of December I will not be available.

If you have any questions please contact me at 744-3223.

Very truly yours,

William Jones, M. S.
Supervisor, Investigative Section

WJ:bp

DEPOSITION SUBPOENA

United States District Court		DISTRICT Central District of California
MICRODOT, INC., a Delaware corporation		DOCKET NO. CV 85-7895 JMI (Gx)
V. WOODFAST, INC., a dissolved California corporation, etc., et al.		TYPE OF CASE <input checked="" type="checkbox"/> CIVIL <input type="checkbox"/> CRIMINAL
		SUBPOENA FOR <input checked="" type="checkbox"/> PERSON <input checked="" type="checkbox"/> DOCUMENT(S) or OBJECT(S)

TO:

WILLIAM JONES

YOU ARE HEREBY COMMANDED to appear at the place, date, and time specified below to testify at the taking of a deposition in the above-entitled case.

PLACE Sanger, Grayson, Givner & Boone 16633 Ventura Blvd., Suite 600 Encino, CA 91436	DATE AND TIME October 7, 1986 1:00 p.m.
--	---

YOU ARE ALSO COMMANDED to bring with you the following document(s) or object(s):¹

SEE ATTACHED Exhibits "A" and "B"

CANCELLED
10/28/86
VIA *Marilyn*

☐ Please see additional information on reverse

Any subpoenaed organization not a party to this suit is hereby admonished pursuant to Rule 30 (b) (6), Federal Rules of Civil Procedure, to file a designation with the court specifying one or more officers, directors, or managing agents, or other persons who consent to testify on its behalf, and shall set forth, for each person designated, the matters on which he will testify or produce documents or things. The persons so designated shall testify as to matters known or reasonably available to the organization.

U.S. MAGISTRATE (2) OR CLERK OF COURT	DATE
(BY) DEPUTY CLERK	SEP 23 1986
This subpoena is issued upon application of the: <input type="checkbox"/> Plaintiff <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> U.S. Attorney	ATTORNEY'S NAME AND ADDRESS Amy B. Lawrence Sanger, Grayson, Givner & Boone 16633 Ventura Blvd., Suite 600 Encino, CA 91436

(1) If not applicable, enter "none."

(2) A subpoena shall be issued by a magistrate in a proceeding before him, but need not be under the seal of the court. (Rule 17(a), Federal Rules of Criminal Procedure.)

DEFINITIONS AND INSTRUCTIONS

1
2 A. "Document" shall have the meaning ascribed to it
3 in Rule 34 of the Federal Rules of Civil Procedure, and shall
4 include the originals and any and all copies of any and all
5 written, printed, typed, or otherwise recorded matter, however,
6 produced or reproduced, of every kind and description, in
7 whatever form (e.g., final and draft versions) in your actual or
8 constructive possession, custody, care or control, including,
9 but not limited to, all writings, contracts, policy statements,
10 manuals, telephone messages, checks, correspondence, letters,
11 telegrams, notes, mailgrams, minutes of any meetings, agendas,
12 memoranda, interoffice communications, reports, studies,
13 forecasts, projects analyses, working papers, charts, expense
14 account reports, ledgers, journals, financial statements,
15 statements of account, calendars, appointment books, diaries,
16 drawings, graphs, photographs, sound recordings, microfilms,
17 computer documents or any other tangible things or things
18 similar to any of the foregoing. "Document" also shall include
19 originals and copies of all of the above upon which notations in
20 writing, print or otherwise have been made which do not appear
21 on the originals.

22 B. "Documents referring or relating to" means
23 documents containing, showing, evidencing, referring or relating
24 in any way, directly or indirectly, to the subject matter
25 requested. It is meant to include, among other documents,
26 documents underlying, supporting, now or previously attached or
27 appended to, or used in the preparation of any document called
28 for by each request. All envelopes, explanatory notes or

1 memoranda, and all material that accompanied the documents are
2 included. If the specific document elicited a response, that
3 response is included; if the document was itself a response, the
4 document to which it is responding is included.

5 C. Each request for production of documents herein
6 shall be deemed continuing so as to require prompt supplemental
7 responses, in accordance with Rule 26(e) of the Federal Rules of
8 Civil Procedure, if documents called for herein are obtained,
9 discovered or created between the time of responding to this
10 request and the time of any trial.

11 D. Documents shall be produced as they have been
12 kept in the usual course of business or shall be organized and
13 labeled to correspond to the enumerated requests of this demand.

14 E. If any document responsive to this request is
15 withheld under as claim of privilege, furnish a list specifying
16 each such document and setting forth the following information:
17 (a) the name of the writer, sender, or initiator of each copy of
18 the document; (b) the name, address and identification by
19 employment and title of each person who prepared, received,
20 viewed and has or has had possession, custody or control of each
21 copy of the document; (c) the date of each copy of the document,
22 if any, or an estimate of its date; (d) a description of the
23 subject matter of the document; and (e) a statement of the basis
24 for the claim of privilege.

25 F. "You" and "your" refers to Plaintiff MICRODOT
26 INC. and to its attorneys, agents, employees, officers,
27 directors, investigators, insurance carriers and
28 representatives.

1 G. The "premises" refers to the property located
2 at 11800 Sherman Way, North Hollywood,
3 California, including all buildings and
4 facilities located thereon.
5

6 REQUESTS BEGIN HERE
7

8 1. All documents which relate or refer to, memorial-
9 ize or evidence the frequency of and/or procedures for
10 inspecting the premises and storage facilities to ensure
11 compliance with the California Hazardous Waste Control laws,
12 for the period from March 12, 1982 up to and including
13 November 30, 1984.
14

15 2. All documents which relate or refer to,
16 memorialize or evidence your allegations in Paragraph 25 of
17 the Complaint that "prior to and at the time the Purchase
18 Agreement was executed, Mercury unlawfully discharged
19 hazardous materials onto its premises in violation of
20 California Health and Safety Code Section 25189.5(b)".
21

22 3. All documents which relate or refer to,
23 memorialize or evidence your allegation in Paragraph 28 of
24 the First Amended Complaint that "prior to the date the
25 Purchase Agreement was executed, Mercury had in its posses-
26 sion information that would have enabled Microdot to
27
28

1 determine whether Mercury was in compliance with California
2 Health and Safety Code Section 25189.5(b)".

3
4 4. All documents which relate or refer to or
5 memorialize or evidence your allegation in Paragraph 33 of
6 the Complaint that "the action against Microdot brought by
7 the City related to activity engaged in by Mercury prior to
8 March 12, 1982."

9
10 5. All documents which relate or refer to or
11 memorialize or evidence your allegation in Paragraph 40 of
12 the Complaint that "...on the date the Purchase Agreement
13 was executed an [sic] on March 12, 1982, Mercury was in
14 violation of California Health and Safety Code Section
15 25189.5(b).

16
17 6. All documents which relate or refer to or
18 memorialize or evidence your allegation that Defendants are
19 responsible for the damages incurred by you as a result of
20 the matters alleged in Count 2 of the misdemeanor complaint
21 filed by the City as referred to in Paragraph 22 of the
22 First Amended Complaint.

23
24 7. All documents which relate or refer to or
25 memorialize or evidence your allegation that Defendants are

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1 responsible for the damages incurred by you as a result of
2 the matters alleged in Count 3 of the misdemeanor Complaint
3 filed by the City as referred to in Paragraph 22 of the
4 First Amended Complaint.
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EXHIBIT "B"
DEFINITIONS AND INSTRUCTIONS

A. "Document" shall have the meaning ascribed to it in Rule 34 of the Federal Rules of Civil Procedure, and shall include the originals and any and all copies of any and all written, printed, typed, or otherwise recorded matter, however, produced or reproduced, of every kind and description, in whatever form (e.g., final and draft versions) in your actual or constructive possession, custody, care or control, including, but not limited to, all writings, contracts, policy statements, manuals, telephone messages, checks, correspondence, letters, telegrams, notes, mailgrams, minutes of any meetings, agendas, memoranda, interoffice communications, reports, studies, forecasts, projects analyses, working papers, charts, expense account reports, ledgers, journals, financial statements, statements of account, calendars, appointment books, diaries, drawings, graphs, photographs, sound recordings, microfilms, computer documents or any other tangible things or things similar to any of the foregoing. "Document" also shall include originals and copies of all of the above upon which notations in writing, print or otherwise have been made which do not appear on the originals.

B. "Documents referring or relating to" means documents containing, showing, evidencing, referring or relating in any way, directly or indirectly, to the subject matter requested. It is meant to include, among other documents, documents underlying, supporting, now or previously attached or appended to, or used in the preparation of any document called for by each request. All envelopes, explanatory notes or

1 memoranda, and all material that accompanied the documents are
2 included. If the specific document elicited a response, that
3 response is included; if the document was itself a response, the
4 document to which it is responding is included.

5 C. Each request for production of documents herein
6 shall be deemed continuing so as to require prompt supplemental
7 responses, in accordance with Rule 26(e) of the Federal Rules of
8 Civil Procedure, if documents called for herein are obtained,
9 discovered or created between the time of responding to this
10 request and the time of any trial.

11 D. Documents shall be produced as they have been
12 kept in the usual course of business or shall be organized and
13 labeled to correspond to the enumerated requests of this demand.

14 E. If any document responsive to this request is
15 withheld under as claim of privilege, furnish a list specifying
16 each such document and setting forth the following information:
17 (a) the name of the writer, sender, or initiator of each copy of
18 the document; (b) the name, address and identification by
19 employment and title of each person who prepared, received,
20 viewed and has or has had possession, custody or control of each
21 copy of the document; (c) the date of each copy of the document,
22 if any, or an estimate of its date; (d) a description of the
23 subject matter of the document; and (e) a statement of the basis
24 for the claim of privilege.

25 F. "You" and "your" refers to Plaintiff MICRODOT
26 INC. and to its attorneys, agents, employees, officers,
27 directors, investigators, insurance carriers and
28 representatives.

1 G. The "premises" refers to the property located at
2 11800 Sherman Way, North Hollywood, California, including
3 all buildings and facilities located thereon.
4

5 REQUEST BEGIN HERE

6 1. All documents, including notes and memorandum,
7 which relate or refer to, memorialize or evidence anything
8 regarding the investigation into any information relating to
9 Mercury's or Microdot's violations of the California Hazard-
10 ous Waste Control Laws, for the period from January 1, 1979
11 up to and including the present.

12 2. All documents which relate or refer to,
13 memorialize or evidence any information concerning investi-
14 gations by you involving the premises located at 11800
15 Sherman Way, North Hollywood, California, from January 1,
16 1979 up to and including the present.
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OFFICE

GRAYSON, W8925P04.333

& BOOKE



COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

313 NORTH FIGUEROA STREET • LOS ANGELES, CALIFORNIA 90012 • (213) 974-



Reply refer to:

2615 S. Grand Ave., Room 607
Los Angeles, CA 90007

October 17, 1986

Sanger, Grayson, Givner & Boone
16633 Ventura Blvd., Suite 600
Encino, CA 91436

Attention Michael Marcus, Attorney

Dear Mr. Marcus:

MICRODOT, INC. VS. WOODFAST, INC.

Enclosed please find the hand drawn map of the Mercury Aerospace facility at 11800 Sherman Way, North Hollywood, CA, and my recollection of where the hazardous waste discharges occurred.

Please inform me as soon as possible the date you wish to take a deposition from me. Be reminded that from the second week in November through the first of December I will not be available.

If you have any questions please contact me at 744-3223.

Very truly yours,

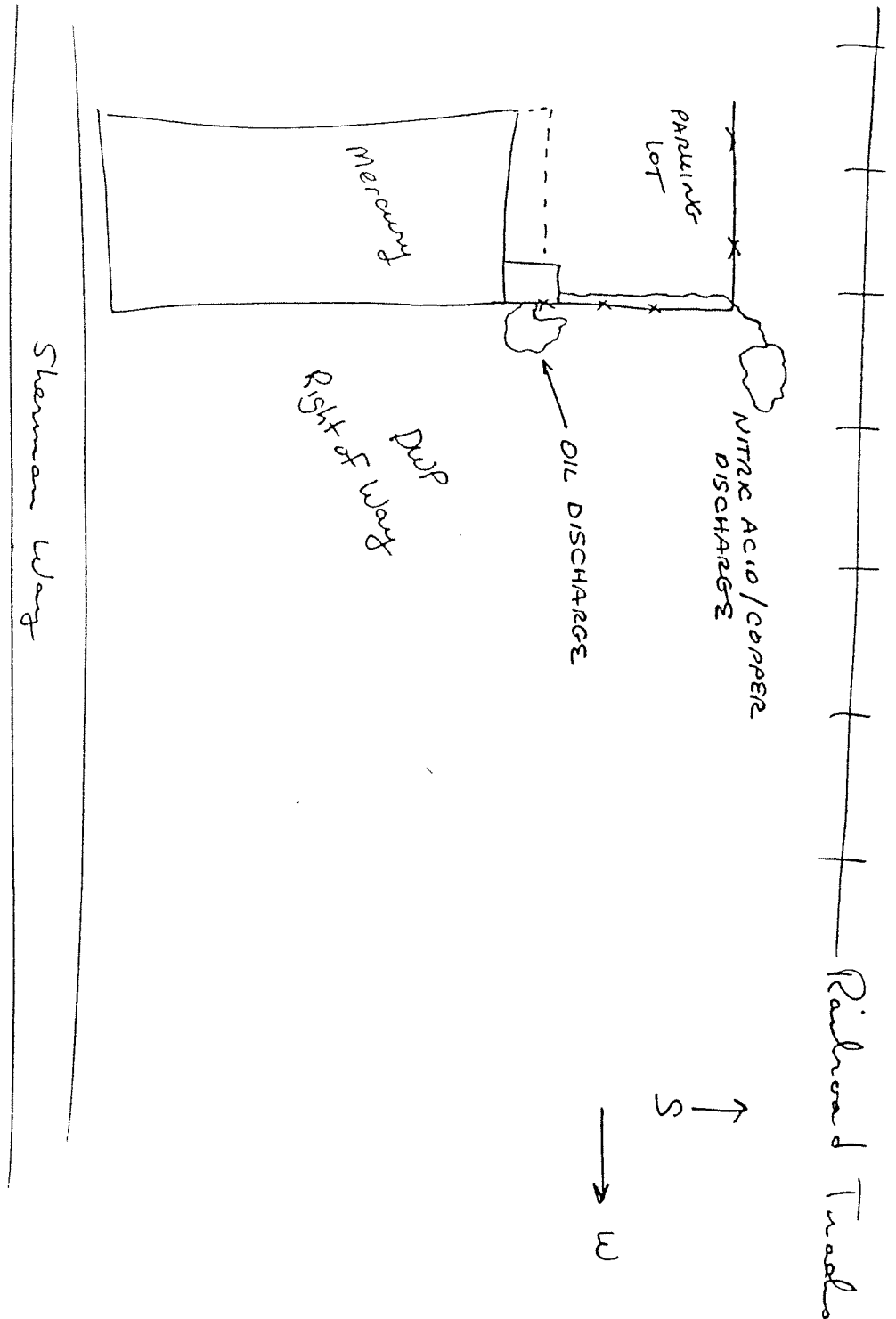
William Jones, M. S.
Supervisor, Investigative Section

WJ:bp

60/44

10-17-86

Drawn from memory by
W. JONES (LACHS)



HAZARDOUS MATERIALS CONTROL PROGRAM
REQUEST FOR SERVICE LOG

Log # (yrnnnn) 882339 Date 7/18/88 ☐Emergency Response ☐Illegl Storage
Received: By JT 7/18/88 ☐Illegl Disp Onsite ☐Clean Up
Log Entry: By 11 11 ☐Illegl Disp Offsite ☒P. H. L.
Name: Mercury Aerospace Inc. Phone: (818) 982-4800
Address: 11800 Sherman Way City: N. Hollywood
Substance: RHL Zip: 91605
Scope: Since 7/23/87 business name change (#536619 - Kaynar Co. Mercury Aerospace Fasteners to be canceled). Same business but name change. Wants inspection and license.

Status: _____

Section Assign To: ☐NE ☒NW ☐SE ☐SW ☐ER ☐OH ☐ENF ☐SM Date: 7/21/88
Inspector Assign To: LB Assign By DT Date: 7/21/88
Service Requested By Lida Bagheri Address 11800 Sherman Way, N. Hollywood Phone 818 982-4800
91605 X216

Log # (yrnnnn) _____ Date 11 11 ☐Emergency Response ☐Illegl Storage
Received: By _____ 11 11 ☐Illegl Disp Onsite ☐Clean Up
Log Entry: By _____ 11 11 ☐Illegl Disp Offsite ☐P. H. L.
Name: _____ Phone: _____
Address: _____ City: _____
Substance: _____ Zip: _____
Scope: _____

Status: _____

Section Assign To: ☐NE ☐NW ☐SE ☐SW ☐ER ☐OH ☐ENF ☐SM Date: 11 11
Inspector Assign To: _____ Assign By _____ Date: 11 11
Service Requested By _____ Address _____ Phone _____

BUSINESS INFORMATION (BP-1)

INSTRUCTIONS: The information below was submitted by your business to the Los Angeles City Fire Department. Review all the information and make any necessary changes to update your record. Cross out any information that is incorrect and insert the correct or missing information in the space provided. Sign the bottom of this form. Your signature indicates that this information is accurate as corrected by you.

LAFD NUMBER: 039978-001-2 THIS IS YOUR CURRENT LAFD ACCOUNT NUMBER. THIS NUMBER MUST APPEAR ON ALL BUSINESS PLAN FORMS! 11500 SHERMAN WAY

Address Where Business Is Conducted: ~~11800 W SHERMAN WY~~ Zip Code: 91605 - 3779

Unit Type: "BUILDING" (MACHINE SHOP & OFFICES) Unit Number: _____
PAVING LOT

(Examples of Unit Types: apartment, bay, building, berth, basement, dock, floor, foyer, gate, hangar, loft, level, mezzanine, office, pad, penthouse, pier, roof, room, runway, stage, shop, slip, space, stall, suite, terminal, track, unit.)

Business Owner Name: BLANC AERO INDUSTRIES
~~MICRODOT INC~~

WORK PHONE NUMBER
(515) 952 4500
~~(312) 899 1925~~

On-Site Manager: M.G. SZOSTAK
~~E.F. EARLEY~~

(818) 982-4800

Emergency Contact: M.G. SZOSTAK
~~E.F. EARLEY~~

EMERGENCY PHONE NUMBER
~~(214) 400-1111~~

Alternate Emergency Contact: JIM MOSS

FX-6 Personal Privacy

Standard Industrial Classification (SIC) Code of Business: 3632 MACHINE SHOP
5510 CLERICAL EMPLOYEES

Below is your mailing address. Please make corrections on the space provided to the left.

 MERCURY AEROSPACE FASTENERS INC
 P O BOX 9759
 NORTH HOLLYWOOD CA 91609

Describe the business operations that use or handle hazardous materials: MACHINE SHOP

MANUFACTURER, STEEL AEROSPACE BOLTS; LUBRICATION, COOLING, CLEANING, DEGREASING

Maximum number of employees: 60 CURRENT Total square footage of facility: 37,000 SQ FT UNDER REPAIR

Mr D. Balcou. [Signature] Vice President
 Blanc Aero Ind.

Signature of Business Owner or Authorized Representative Title Date

8/1/88
 Date

Office Use Only | 902: _____ Insp. I.D.: _____ Date: _____ D/E I.D.: _____ Date: _____

CP 315

INSTRUCTIONS: READ ALL THE INSTRUCTIONS BELOW AND PHOTOCOPY EXTRA COPIES OF THIS FORM BEFORE COMPLETING IT. (DO NOT REPORT HAZARDOUS WASTE ON THIS FORM)
 1. COMPLETE A SEPARATE FORM FOR EACH BUILDING, OUTDOOR AREA, UNDERGROUND TANK OR ROOM WHERE HAZARDOUS MATERIALS ARE LOCATED. USE BOX BELOW TO SPECIFY THE LOCATION OF THE HAZARDOUS MATERIALS LISTED ON THIS FORM.

LOCATION OF HAZARDOUS MATERIALS: COMPLETE ALL ITEMS IN BOX

BUSINESS NAME: MERCURY AEROSPACE FASTENERS INC. ADDRESS: 11800 SHERMAN WAY, NORTH HOLLYWOOD 91605

ROOM NAME OR NUMBER: SOUTH BACKLIT LOT BUILDING NAME, OUTDOOR AREA, OR UNDERGROUND TANK NUMBER: 500 GPM CAPACITY ABOVE GROUND STORAGE TANK, SOUTH SIDE PARKING LOT
(SOUTH FENCE)

2. WHEN SUBMITTING A BUSINESS PLAN INVENTORY, ONLY INCLUDE HAZARDOUS MATERIALS HANDLED OR STORED IN AMOUNTS TOTALING 55 GALLONS, 500 POUNDS, 200 CUBIC FEET, OR MORE, AND NOT PRE-PACKAGED FOR DIRECT DISTRIBUTION TO, AND USE BY, THE GENERAL PUBLIC. COMPLETE ITEMS 1-10 FOR EACH HAZARDOUS MATERIAL STORED OR HANDLED AT THE LOCATION SPECIFIED ABOVE. INCLUDE RAW MATERIALS, FINISHED CHEMICAL PRODUCTS, AND CHEMICALS MANUFACTURED OR REPACKAGED. USE THE ENCLOSED TABLE OF CODES FOR ITEMS 4, 5, and 7.

ADDITIONAL INSTRUCTIONS: ITEM 1: ENTER PRODUCT NAME. ITEM 2: ENTER MAXIMUM QUANTITY HANDLED OR STORED AT ANY ONE TIME AT THE ABOVE LOCATION; INCLUDE UNITS (POUNDS, GALLONS, CUBIC FEET). ITEM 3: ENTER TOTAL YEARLY QUANTITY HANDLED OR STORED AT THE ABOVE LOCATION; INCLUDE UNITS (POUNDS, GALLONS, CUBIC FEET). ITEM 4: ENTER ALL TYPES OF CONTAINERS USED TO STORE THE PRODUCT (USE TABLE 1). ITEM 5: ENTER ALL THE HEALTH AND PHYSICAL HAZARD CODES THAT APPLY TO EACH PRODUCT (USE TABLE 2). ITEM 6: ENTER THE PHYSICAL STATE OF THE PRODUCT (S = SOLID, L = LIQUID, G = GAS). ITEM 7: ENTER THE ONE HAZARD CLASS THAT APPLIES TO THE PRODUCT (USE TABLE 3). ITEM 8: (X) THIS ITEM IF PRODUCT OR ANY INGREDIENT IS EXTREMELY HAZARDOUS. ITEM 9: ENTER INGREDIENTS AND PERCENT OF CONCENTRATION. ITEM 10: ENTER THE CAS (CHEMICAL ABSTRACT SERVICE) NUMBERS FOR EACH HAZARDOUS INGREDIENT.

-9- HAZARDOUS CHEMICAL INGREDIENTS & PERCENTAGE OF EACH										-10- CAS NUMBERS OF EACH INGREDIENT									
-1- PRODUCT NAME	-2- MAXIMUM QUANTITY ANY TIME	-3- TOTAL YEARLY QUANTITY	-4- STORAGE TYPES table 1	-5- HEALTH & PHYSICAL HAZARDS table 2	-6- PHYS. STATE table 2	-7- HAZARD CLASS table 3	-8- (X) EXTREMELY HAZARDOUS	PROPANE											
								100%											
100 GALS										250 TO 300 GALS									
-9- HAZARDOUS CHEMICAL INGREDIENTS & PERCENTAGE OF EACH										-10- CAS NUMBERS OF EACH INGREDIENT									

-9- HAZARDOUS CHEMICAL INGREDIENTS & PERCENTAGE OF EACH										-10- CAS NUMBERS OF EACH INGREDIENT									
-1- PRODUCT NAME	-2- MAXIMUM QUANTITY ANY TIME	-3- TOTAL YEARLY QUANTITY	-4- STORAGE TYPES table 1	-5- HEALTH & PHYSICAL HAZARDS table 2	-6- PHYS. STATE table 2	-7- HAZARD CLASS table 3	-8- (X) EXTREMELY HAZARDOUS												

10/2/88

BUSINESS PLAN HAZARDOUS MATERIALS INVENTORY (BP-2)

INSTRUCTIONS: READ ALL THE INSTRUCTIONS ON THE FRONT SIDE AND PHOTOCOPY EXTRA COPIES OF THIS FORM BEFORE COMPLETING IT. (DO NOT REPORT HAZARDOUS WASTE ON THIS FORM). COMPLETE A SEPARATE FORM FOR EACH BUILDING, OUTDOOR AREA, OR ROOM WHERE HAZARDOUS MATERIALS ARE LOCATED. USE BOX BELOW TO SPECIFY THE LOCATION OF THE HAZARDOUS MATERIALS LISTED ON THIS FORM.

LOCATION OF HAZARDOUS MATERIALS: COMPLETE ALL ITEMS IN BOX									
BUSINESS NAME: <u>MERCURY AEROSPACE FASTENERS, INC.</u>		ADDRESS: <u>11860 STEERINGWAY, NORTH HAVEN, CT 06465</u>		BUILDING NAME, OUTDOOR AREA, OR UNDERGROUND TANK NUMBER: <u>OUTSIDE RAIL, CONTAINMENT WALL, SOUTH OF SWATH DOCK</u>		ROOM NAME OR NUMBER: <u>SWATH DOCK</u>			
<div> <div> CHEMICAL OR -1- PRODUCT NAME <u>DEOLENE #13-M</u> <u>PETROLEUM DERIVED MINERAL OIL</u> </div> <div> -2- MAXIMUM QUANTITY ANY TIME <u>165 Gm</u> </div> <div> -3- TOTAL YEARLY QUANTITY <u>1155 Gm</u> </div> <div> -4- STORAGE TYPES table 1 <u>B</u> </div> <div> -5- HEALTH & PHYSICAL HAZARDS table 2 1 <u>2</u> 2 <u>2</u> 3 <u>4</u> 4 <u>5</u> </div> <div> -6- PHYS. STATE table 2 <u>LV</u> </div> <div> -7- HAZARD CLASS table 3 <u>IB</u> </div> <div> -8- (X) EXTREMELY HAZARDOUS <u>—</u> </div> <div> -9- HAZARDOUS CHEMICAL INGREDIENTS & PERCENTAGE OF EACH <u>GRANDINITE - DEPT.</u> <u>OIL MIST</u> <u>CHLORINATED PARAFFINS</u> </div> <div> -10- CAS NUMBERS OF EACH INGREDIENT <u>64741-96-4</u> <u>63449-39-8</u> </div> </div>									
<div> <div> CHEMICAL OR -1- PRODUCT NAME <u>RUBY #75-A THINER PELLING OIL</u> <u>PETROLEUM DERIVED MINERAL OIL</u> </div> <div> -2- MAXIMUM QUANTITY ANY TIME <u>55 Gm</u> </div> <div> -3- TOTAL YEARLY QUANTITY <u>275 Gm</u> </div> <div> -4- STORAGE TYPES table 1 <u>B</u> </div> <div> -5- HEALTH & PHYSICAL HAZARDS table 2 1 <u>2</u> 2 <u>2</u> 3 <u>4</u> 4 <u>5</u> </div> <div> -6- PHYS. STATE table 2 <u>LV</u> </div> <div> -7- HAZARD CLASS table 3 <u>IB</u> </div> <div> -8- (X) EXTREMELY HAZARDOUS <u>—</u> </div> <div> -9- HAZARDOUS CHEMICAL INGREDIENTS & PERCENTAGE OF EACH <u>OIL MIST</u> <u>KEROSENE</u> </div> <div> -10- CAS NUMBERS OF EACH INGREDIENT <u>64741-96-4</u> <u>64742-88-7</u> </div> </div>									
<div> <div> CHEMICAL OR -1- PRODUCT NAME <u>STODDARD SOLVENT</u> <u>(CATEURIN THINNER 350B)</u> </div> <div> -2- MAXIMUM QUANTITY ANY TIME <u>165 Gm</u> </div> <div> -3- TOTAL YEARLY QUANTITY <u>1540 Gm</u> </div> <div> -4- STORAGE TYPES table 1 <u>B</u> </div> <div> -5- HEALTH & PHYSICAL HAZARDS table 2 1 <u>2</u> 2 <u>2</u> 3 <u>4</u> 4 <u>5</u> </div> <div> -6- PHYS. STATE table 2 <u>LV</u> </div> <div> -7- HAZARD CLASS table 3 <u>IB</u> </div> <div> -8- (X) EXTREMELY HAZARDOUS <u>—</u> </div> <div> -9- HAZARDOUS CHEMICAL INGREDIENTS & PERCENTAGE OF EACH <u>LIGHT PETROLEUM DISTILLATE</u> <u>C9-C12 ALKYL BENZENES</u> <u>BENZENE</u> </div> <div> -10- CAS NUMBERS OF EACH INGREDIENT <u>CAS 64742-47-8</u> <u>CAS 65515-25-3</u> <u>CAS 71-43-2</u> </div> </div>									

INSTRUCTIONS: READ ALL THE INSTRUCTIONS ON THE FRONT SIDE AND PHOTOCOPY EXTRA COPIES OF THIS FORM BEFORE COMPLETING IT. (DO NOT REPORT HAZARDOUS WASTE ON THIS FORM). COMPLETE A SEPARATE FORM FOR EACH BUILDING, OUTDOOR AREA, OR ROOM WHERE HAZARDOUS MATERIALS ARE LOCATED. USE BOX BELOW TO SPECIFY THE LOCATION OF THE HAZARDOUS MATERIALS LISTED ON THIS FORM.

LOCATION OF HAZARDOUS MATERIALS: COMPLETE ALL ITEMS IN BOX									
BUSINESS NAME: <u>WHEELWRIGHT AVIATION INC</u>		ADDRESS <u>11800 STEVENSON WAY, NORTH HAVEN, CT 06460</u>							
ROOM NAME OR NUMBER: <u>SOUTH DECK</u>		BUILDING NAME, OUTDOOR AREA, OR UNDERGROUND TANK NUMBER <u>OUTSIDE RAIL CONTAINMENT WALL, SOUTH OF SOUTH DECK</u>							
<div> <div> CHEMICAL OR -1- PRODUCT NAME <u>FULSIL # 344-G</u> <u>PETROLEUM DERIVED MINERAL OIL</u> </div> <div> <div> -2- MAXIMUM QUANTITY ANY TIME <u>55 GALS</u> </div> <div> <div> -3- TOTAL YEARLY QUANTITY <u>330 GALS</u> </div> <div> <div> -4- STORAGE TYPES table 1 <u>B</u> </div> <div> <div> -5- HEALTH & PHYSICAL HAZARDS table 2 1 <u>2</u> 2 <u>✓</u> 3 <u>4</u> 4 <u>5</u> </div> <div> <div> -6- PHYS. STATE table 2 <u>LV</u> <u>G</u> </div> <div> <div> -7- HAZARD CLASS table 3 <u>1B</u> </div> <div> <div> -8- (X) EX-TREMELY HAZARDOUS <u>—</u> </div> </div> </div> </div> </div> <div> <div> -9- HAZARDOUS CHEMICAL INGREDIENTS & PERCENTAGE OF EACH <u>OIL MIST</u> <u>CITRONATED PARAFFINS</u> </div> <div> <div> -10- CAS NUMBERS OF EACH INGREDIENT <u>64741-96-4</u> <u>63449-39-8</u> </div> </div> </div> </div></div></div></div>									
<div> <div> CHEMICAL OR -1- PRODUCT NAME <u>110 GRL</u> <u>PETROLEUM DERIVED MINERAL OIL</u> </div> <div> <div> -2- MAXIMUM QUANTITY ANY TIME <u>110 GRL</u> </div> <div> <div> -3- TOTAL YEARLY QUANTITY <u>660 GRL</u> </div> <div> <div> -4- STORAGE TYPES table 1 <u>B</u> </div> <div> <div> -5- HEALTH & PHYSICAL HAZARDS table 2 1 <u>2</u> 2 <u>✓</u> 3 <u>4</u> 4 <u>5</u> </div> <div> <div> -6- PHYS. STATE table 2 <u>LV</u> <u>G</u> </div> <div> <div> -7- HAZARD CLASS table 3 <u>1B</u> </div> <div> <div> -8- (X) EX-TREMELY HAZARDOUS <u>—</u> </div> </div> </div> </div> </div> <div> <div> -9- HAZARDOUS CHEMICAL INGREDIENTS & PERCENTAGE OF EACH <u>OIL MIST</u> </div> <div> <div> -10- CAS NUMBERS OF EACH INGREDIENT <u>64741-88-4</u> </div> </div> </div> </div></div></div></div>									
<div> <div> CHEMICAL OR -1- PRODUCT NAME <u>55 GRL</u> <u>PETROLEUM DERIVED MINERAL OIL</u> </div> <div> <div> -2- MAXIMUM QUANTITY ANY TIME <u>55 GRL</u> </div> <div> <div> -3- TOTAL YEARLY QUANTITY <u>55 GRL</u> </div> <div> <div> -4- STORAGE TYPES table 1 <u>B</u> </div> <div> <div> -5- HEALTH & PHYSICAL HAZARDS table 2 1 <u>2</u> 2 <u>✓</u> 3 <u>4</u> 4 <u>5</u> </div> <div> <div> -6- PHYS. STATE table 2 <u>LV</u> <u>G</u> </div> <div> <div> -7- HAZARD CLASS table 3 <u>1B</u> </div> <div> <div> -8- (X) EX-TREMELY HAZARDOUS <u>—</u> </div> </div> </div> </div> </div> <div> <div> -9- HAZARDOUS CHEMICAL INGREDIENTS & PERCENTAGE OF EACH <u>OIL MIST</u> <u>CITRONATED PARAFFINS</u> </div> <div> <div> -10- CAS NUMBERS OF EACH INGREDIENT <u>64741-96-4</u> <u>63449-39-8</u> </div> </div> </div> </div></div></div></div>									

INSTRUCTIONS: READ ALL THE INSTRUCTIONS ON THE FRONT SIDE AND PHOTOCOPY EXTRA COPIES OF THIS FORM BEFORE COMPLETING IT. (DO NOT REPORT HAZARDOUS WASTE ON THIS FORM). COMPLETE A SEPARATE FORM FOR EACH BUILDING, OUTDOOR AREA, OR ROOM WHERE HAZARDOUS MATERIALS ARE LOCATED. USE BOX BELOW TO SPECIFY THE LOCATION OF THE HAZARDOUS MATERIALS LISTED ON THIS FORM.

LOCATION OF HAZARDOUS MATERIALS: COMPLETE ALL ITEMS IN BOX

BUSINESS NAME: *PERKINS PROSPACE PARTNERS, INC*

ADDRESS

ROOM NAME OR NUMBER	BUILDING NAME, OUTDOOR AREA, OR UNDERGROUND TANK NUMBER
1144	BUILDING

NEW DISCOVERY TEST AREA" AT WEST OF BUILDING

4/16/65

-1- PRODUCT NAME	-2- MAXIMUM QUANTITY ANY TIME	-3- TOTAL YEARLY QUANTITY	-4- STORAGE TYPES	-5- HEALTH & PHYSICAL HAZARDS	-6- PHYS. STATE	-7- HAZARD CLASS	-8- (X) EXTREMELY HAZARDOUS	-9- HAZARDOUS CHEMICAL INGREDIENTS & PERCENTAGE OF EACH	-10- CAS NUMBERS OF EACH INGREDIENT
CHEMICAL OR STABILIZED 1-1-1 TRICHLOROETHYLENE PETROLEUM DERIVED SOLVENT, NON FLAMMABLE									
			B	1	S	D		METHYL CHLOROFORM	71-55-6
				2	L				
				3	G				
				4					
				5					
75 GALS	330 GALS								

-1- CHEMICAL OR PRODUCT NAME		-2- MAXIMUM QUANTITY ANY TIME	-3- TOTAL YEARLY QUANTITY	-4- STORAGE TYPES table 1	-5- HEALTH & PHYSICAL HAZARDS table 2	-6- PHYS. STATE	-7- HAZARD CLASS table 3	-8- (X) EXTREMELY HAZARDOUS
					1	S		
					2	L		
					3	G		
					4			
					5			

CHEMICAL OR -1- PRODUCT NAME		-9-HAZARDOUS CHEMICAL INGREDIENTS & PERCENTAGE OF EACH					-10-CAS NUMBERS OF EACH INGREDIENT
-2- MAXIMUM QUANTITY ANY TIME	-3- TOTAL YEARLY QUANTITY	-4- STORAGE TYPES table 1	-5- HEALTH & PHYSICAL HAZARDS table 2	-6- PHYS. STATE S L G	-7- HAZARD CLASS table 3	-8- (X) EX- TREMELY HAZARDOUS	%
			1				%
			2				%
			3				%
			4				%
			S				%

INSTRUCTIONS: READ THE INSTRUCTIONS BELOW AND PHOTOCOPY EXTRA COPIES OF THIS FORM BEFORE COMPLETING IT. (DO NOT REPORT HAZARDOUS MATERIALS ON THIS FORM)

1. COMPLETE A SEPARATE FORM FOR EACH BUILDING, OUTDOOR AREA, UNDERGROUND TANK OR ROOM WHERE HAZARDOUS WASTES ARE LOCATED. USE THE BOX BELOW TO SPECIFY THE LOCATION OF THE HAZARDOUS WASTES LISTED ON THIS FORM.

LOCATION OF HAZARDOUS WASTE: COMPLETE ALL ITEMS IN BOX

BUSINESS NAME: WILKINSON PRO-SPACE FASTENERS, INC

ADDRESS:

LOCATION OF HAZARDOUS WASTE: COMPLETE ALL ITEMS IN BOX

BUSINESS NAME: LifeSpace Aerospace Fasteners, Inc ADDRESS: 11800 STEPHENSON WAY, NORTH HOLLYWOOD, 91605

BUILDING NAME, OUTDOOR AREA, 7508th CRAFTSMAN WASTE OIL TANK, IN CONTAINMENT WELL, SOUTH DAKOTA

QUANTITY 200000 DRUM

OR UNDERGROUND TANK NUMBER

ROOM NAME OR NUMBER: *51474 Dick*

2. IMPORTANT NOTICE: WHEN SUBMITTING A BUSINESS PLAN INVENTORY, ONLY INCLUDE HAZARDOUS WASTES HANDLED OR STORED IN AMOUNTS TOTALING 55 GALLONS, 500 POUNDS, 200 CUBIC FEET, OR MORE, AND NOT PREPACKAGED FOR DIRECT DISTRIBUTION TO, AND USE BY, THE GENERAL PUBLIC. COMPLETE ITEMS 1-10 FOR EACH HAZARDOUS WASTE HANDLED OR STORED AT THE LOCATION SPECIFIED ABOVE. USE THE CODES ON THE ENCLOSED TABLE OF CODES TO FILL IN ITEMS 4, 5, AND 7. FOR ITEM 6 USE TABLE III ON THE BACK OF YOUR UNIFORM HAZARDOUS WASTE MANIFEST.

ADDITIONAL INSTRUCTIONS: ITEM 1: ENTER HAZARDOUS WASTE NAME. ITEM 2: ENTER THE MAXIMUM QUANTITY HANDELED OR STORED AT ANY ONE TIME AT THE ABOVE LOCATION; INCLUDE UNITS (POUNDS, GALLONS, CUBIC FEET). ITEM 3: ENTER TOTAL YEARLY QUANTITY HANDELED OR STORED AT THE ABOVE LOCATION; INCLUDE UNITS (POUNDS, GALLONS, CUBIC FEET). ITEM 4: LIST ALL TYPES OF CONTAINERS USED TO STORE THE WASTE (USE TABLE 1). ITEM 5: USE ALL TREATMENT AND DISPOSAL METHODS THAT APPLY (USE TABLE 4). ITEM 6: ENTER THE HAZARDOUS WASTE CODE USED ON YOUR HAZARDOUS WASTE MANIFEST (TABLE 11) ON THE BACK OF THE MANIFEST. ITEM 7: ENTER THE ONE HAZARD CLASS THAT APPLIES TO THE WASTE (USE TABLE 3). ITEM 8: (X) THIS ITEM IF THE WASTE OR ANY INGREDIENT IS EXTREMELY HAZARDOUS. ITEM 9: ENTER THE HAZARDOUS INGREDIENTS AND PERCENT OF CONCENTRATION. ITEM 10: ENTER THE CAS (CHEMICAL ABSTRACT SERVICE) NUMBER FOR EACH HAZARDOUS INGREDIENT.

[illegible]

STANDARD BUSINESS PLAN INDEX

BP-5

This form is to be used as a checklist for elements required to be WRITTEN INTO a Standard Business Plan. All elements must be submitted in the following order. Refer to the front side of this page for more information on elements 6, 7, 8 & 9..

STANDARD BUSINESS PLAN REQUIRED ELEMENTS	ELEMENT ATTACHED AND COMPLETE - (BUSINESS TO INITIAL AND DATE)	PAGE No.	REVIEW FOR ADEQUACY OFFICIAL USE ONLY (INITIAL AND DATE)
1. BP-1 (BUSINESS INFORMATION).....	<u>DE 8/1/88</u>	<u>1</u>	
2. BP-2 (BUSINESS PLAN HAZARDOUS MATERIALS INVENTORY).....	<u>DE 8/1/88</u>	<u>2 THRU 6</u>	
3. BP-3 (BUSINESS PLAN HAZARDOUS WASTE INVENTORY).....	<u>DE 8/1/88</u>	<u>7, 8</u>	
4. BP-5 (STANDARD BUSINESS PLAN INDEX).....	<u>DE 8/1/88</u>	<u>9</u>	
5. BP-6 (SITE MAP FOR BUSINESS PLAN).....	<u>DE 8/1/88</u>	<u>10</u>	
6. EMERGENCY RESPONSE PLANS			
(a) Notification Procedures (who will be notified and how?).....	<u>DE 8/1/88</u>	<u>11</u>	
(b) Medical Assistance Plan.....	<u>DE 8/1/88</u>	<u>11</u>	
(c) Evacuation Plan.....	<u>DE 8/1/88</u>	<u>11</u>	
(d) Mitigation (steps taken to minimize potential harm).....	<u>DE 8/1/88</u>	<u>11</u>	
(e) Abatement Plan(how will an unauthorized release be stopped?)	<u>DE 8/1/88</u>	<u>12</u>	
7. PREVENTION PLAN (how will an unauthorized release be prevented?)	<u>DE 8/1/88</u>	<u>13</u>	
8. NEW EMPLOYEE TRAINING			
(a) Employees handling hazardous materials.....	<u>DE 8/1/88</u>	<u>14</u>	
(b) Employees responsible for coordinating with first responders	<u>DE 8/1/88</u>	<u>14</u>	
(c) Employees responsible for deployment of emergency equipment.	<u>DE 8/1/88</u>	<u>14</u>	
(d) Employee training on Emergency Response Plans.....	<u>DE 8/1/88</u>	<u>14</u>	
9. REFRESHER TRAINING			
(a) Employees who handle hazardous materials.....	<u>DE 8/1/88</u>	<u>15</u>	
(b) Employees responsible for coordinating with first responders	<u>DE 8/1/88</u>	<u>15</u>	
(c) Employees responsible for deployment of emergency equipment.	<u>DE 8/1/88</u>	<u>15</u>	
(d) Refresher training on Emergency Response Plans.....	<u>DE 8/1/88</u>	<u>15</u>	

MERCURY Aerospace Fasteners, Inc.

BUSINESS NAME

JAMES I. COLE

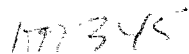
PERSON COMPLETING BUSINESS PLAN

PRODUCTION CONTROL

MINISTER

TITLE

LAFO No. 039978-001-2



Business Address (Site Address): 11800 SHERMAN WAY, NO. HOLLYWOOD 91605 Facility Unit: MACHINE SHOP BUILDING

ft Date: 7/22/88

ELEMENT 6EMERGENCY RESPONSE PLANS6A. IN THE EVENT OF REPORTABLE HAZARDOUS MATERIALS OF WASTE RELEASE OR THREATENED RELEASE.

- (1) Mercury will contact the State Office of Emergency Services by telephone at tel No.s 1-800-852-7550 or 1-916-427-4341.
- (2) Local emergency response personnel will be contacted by telephone at tel No 911.
- (3) Personnel within the plant will be contacted directly by management, a task very quickly accomplished in a plant as small as Mercury Aerospace.

6B. MEDICAL ASSISTANCE PLAN:

During normal working hours, employees will be treated at the Vanowen Medical Group, 11432 Vanowen Street (between Lankershim and Tujunga), North Hollywood, tel (818) 764-8838.

After normal working hours, employees can be treated at the Medical Center of North Hollywood at 12629 Riverside Dr., North Hollywood 91607, tel (818) 980-9200.

Alternatively, care can be sought at the Valley Hospital Medical Center at 14500 Sherman Circle, Van Nuys 91405, tel (818) 997-0101.

6C. EVACUATION PLAN:

No matter how serious the spillage, no hazardous material exists at Mercury Aerospace in sufficient quantity or concentration to warrant evacuation of any people other than Mercury employees. The plant is surrounded on three sides by open land, and the fourth side is bounded by Sherman Way. In case of the need to evacuate Mercury personnel, the employees are instructed directly by management to evacuate the building immediately. Each employee will immediately shut down his/her machine and leave by the nearest exit. ALL exits remain unlocked during the working hours, with the exception of the front (lobby) entrance, which is locked after 4:30 P.M.. All employees will congregate in the east parking lot to await a roll call and further instructions.

6D. MITIGATION:

All materials containig hazardous substances are stored to the south of the building in one of two concrete containment wells. The dimensions of the concrete wells has been calculated to exceed the total volume of all drums or tanks stored within them. Any spill will therefore be confined to the containment areas, and no substances will seep into the ground. A large supply (up to 48 50lb bags) of safety absorbent is kept on hand at any time. Mercury also possesses both an electric and hand pump, and several empty 55 gal barrels equipped with clamp-down lids.

6E. ABATEMENT PLAN:

Since the greatest risks of spillage in unloading incoming oils/solvents and moving them to their storage areas, great care is taken with the forklift, which in these cases can only be operated by one of two experienced forklift drivers. Barrels are inspected for leaks when received and when stored, and the containment areas are reviewed at least once a day.

ELEMENT 77. PREVENTION PLAN:

Many of the precautionary measures which Mercury has taken have been outlined in Section 6. Mercury is not a high volume user of hazardous materials, nor does Mercury have any substances regarded as extremely hazardous. Essentially Mercury's contact with hazardous substances is restricted to petroleum derived mineral oils with NFPA "slight" health, fire, and reactivity ratings (i.e. rating = No.1), and with solvents for cleaning/degreasing purposes. Risk of a spillage is restricted to ruptured containers, and every precaution is taken so as not to damage barrels or tanks. Oils, solvents and waste are stored in concrete containment areas. The sole exception is the Trichloroethane which is stored in a 55 gal barrel inside the building alongside the degreaser tank in which it is used. These various precautions, along with adequate training (see Elements 8 and 9) and the relatively low hazardous materials risk, make Mercury Aerospace secure against all but the accidental rupture of a 55 gal barrel of oil or solvent whilst being moved.

ELEMENT 8NEW EMPLOYEE TRAINING8A. EMPLOYEES HANDLING HAZARDOUS MATERIALS:

All employees who have any contact with oils or solvents are made aware of the potential health, fire and reactivity dangers of such materials. Employees are given a copy of the material safety data sheets, and in the case of Spanish speaking employees, these sheets are reviewed in Spanish.

Particular attention is paid to the correct and safe transportation of such materials from the time of their receipt to the time of their storage, to the time of their use and disposal.

The two employees who come into contact with the 1-1-1 Trichloroethane are given specific instructions regarding avoidance of inhaled fumes and the need to report any spills immediately.

8B. EMPLOYEES RESPONSIBLE FOR CO-ORDINATING WITH FIRST RESPONDERS:

Given the low potential for hazardous material emergencies at Mercury Aerospace, this program consists of all managers being given the basic guidelines for identifying and responding to an emergency and being given the names and telephone Nos listed in 6A and 6B.

8C. EMPLOYEES RESPONSIBLE FOR DEPLOYMENT OF EMERGENCY EQUIPMENT:

Each employee is authorized to use fire extinguishers, gloves, safety absorbent, masks, oxygen, medical supplies, eye wash stations etc. No emergency equipment exists requiring specialized training.

8D. EMPLOYEES TRAINING ON EMERGENCY RESPONSE PLANS:

Other than the containment of spills with safety absorbent and the evacuation plan, no training is required for emergency response plans.

ELEMENT 9REFRESHER TRAINING

(A through D)

Because of the low potential for hazardous material emergencies, the training as outlined in Element 3 sections A through D is simple and basic and can easily be reinforced on monthly plant safety tours. General refresher training is accomplished once a year in January.

COMPANY NAME: MERCURY AEROSPACE STREET: 11800 Sherman Way CITY & ZIP: NORTH HOLLYWOOD 91605 DISTRICT: 1417
 OWNER: LEON ARTO PERSON INTERVIEWED & TITLE: JIM COLE PHONE NO: (818) 982-4800 NO. EMPLOYEES: 68
 L.A. CO. PHL NO.: INDUSTRIAL WASTE NO. 1 EPA NO.: CAS 981413/1 EMERGENCY NO.: 6000
 TYPE OF FACILITY & DESCRIPTION OF OPERATION/PRODUCTS: AEROSPACE PARTS SAFETY SHOWER: ✓
 EATING AREA: ✓ TOILET & WASHING FACILITIES ADEQUATE: ✓
 PLANT SANITATION ADEQUATE: ✓

PROCESS	MATERIAL	TYPE	VOL/LBS	STORAGE METHOD	DISPOSAL METHOD	MANIFEST	CONTROL
METAL CLEANING PARTS	STANDARD SOLVENT	1450 gal/y	300	100 gal/y	water on	MANIFEST 8808711	MANIFEST
DEGREASER	1:1 TRICHLOROETHYLENE	110 gal/y	330	gal/y		8808711	Normal Decon
RUBBER PARTS						8808711	8808711
MIXED OIL						8808711	8808711
① CARBON SPOOL -40						8808711	8808711
② NICKEL RODS						8808711	8808711
③ TITANIUM						8808711	8808711
④ STAINLESS						8808711	8808711

NUMBER OF UNDERGROUND STORAGE TANKS: 0
 VOLUME & TYPE OF WASTE IN UNDERGROUND TANK(S): 0
 PRIVATE DISPOSAL SYSTEMS ON PREMISES: YES NO NO NO
 ACCESS TO STORM INLET ON PREMISES: YES NO NO NO
 CHLORINATED HYDROCARBON USED: YES NO NO NO
 SEWER CONNECTION ON PREMISES: YES NO NO NO

REMARKS: DELTA MFG
 VIOLATIONS: NONE
 SIGNATURE: Jim Cole

PLEASE PRINT

COUNTY OF LOS ANGELES - PUBLIC HEALTH LICENSE APPLICATION

ACCT: 508406

TODAY'S DATE 10/14/88 DL # _____ DATE BUSINESS STARTED 07 28 88
MO DAY YR

OWNER(S) NAME(S) B L A N C A F E R O I N D U S T R I E S
LAST, FIRST AND MIDDLE INITIAL

PARTNER(S) _____
LAST, FIRST AND MIDDLE INITIAL

DOING BUSINESS AS - TRADE NAME M F R C U R Y H E K O S P A C E F A S T N E R S I N C

BUS. ADDRESS 11800 ENDING NO. _____ FRACTION _____ DIR _____ STREET S H E R M A N W A Y

N O H . ZIP CODE 91605-3779

MAILING ADDRESS _____
NUMBER AND STREET

CITY _____

STATE _____ ZIP CODE _____

TYPE OF BUSINESS TO BE LICENSED Hazardous Waste Generator

VEH. LICENSE NO./ NO. OF MACHINES S I C - 3490

PHONE (918) 982-4800

PREVIOUS ACCOUNT NUMBER IF ANY 53419

SIGNATURE OF APPLICANT U.S. Matic

SIGNATURE OF FIELD REPR. Gay H. Brang

FOR TAX COLLECTORS	
CURRENT FEE	\$
PRORATION	\$
PENALTY	\$
PRIOR YEAR FEE	\$
PRIOR YEAR PEN	\$
PAY-TOTAL FEE DUE	\$

100 BUSINESS CD

13 DISTRICT CODE

**FINAL REPORT FOR THE PHASE I
SUBSURFACE INVESTIGATION**

Conducted at:

Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, CA 91609-9759

Prepared for:

Mr. Jerome Flament
Marketing Manager
Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, CA 91609-9759

May 1, 1989

Enviropro, Inc., Project No. 35401



Mr. Jerome Flament
Marketing Manager
Mercury Aerospace Fasteners
11800 Sherman Way
North Hollywood, CA 91609-9759

May 1, 1989
Project No. 35401

Dear Mr. Flament:

Enclosed is our "Final Report for the Phase I Subsurface Investigation" conducted at Mercury Aerospace Fasteners, located at 11800 Sherman Way, North Hollywood, California.

This report documents and describes all the site investigation work completed to date, presents all data obtained, and includes our recommendations.


After your review, please forward a copy of this report to:

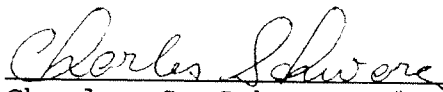
Mr. John Hostak
California Regional Water Quality Control Board
Los Angeles Region
107 S. Broadway, Suite 4027
Los Angeles, CA 90012-4596

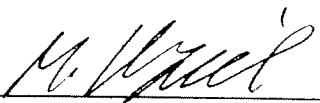
If you have any questions, please call Mrs. Rita Kamat or Dr. Michael Uziel at (818) 998-7197.

Very truly yours,

ENVIROPRO, INC.


Rita Kamat
Environmental Scientist


Charles G. Schwarz, #4624
Senior Geologist


Michael M. Uziel, Ph.D.
President

MMU/CGS/RK/elh

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2.0	INTRODUCTION	1
3.0	DRILLING AND SOIL SAMPLING PROCEDURES	1
4.0	DRILLING AND SOIL SAMPLING RESULTS	3
5.0	CONCLUSIONS	3

APPENDICES:

Appendix A:	Test Boring Logs
Appendix B:	Copy of Original Chain of Custody Record and Laboratory Reports

List of Tables

Table 4.1:	Results of Chemical Analysis of Soil Samples Collected on 2/17/89 at 11800 Sherman Way, North Hollywood, CA.	4
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List of Drawings

Drawing 1:	Test Boring Location	2
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1.0 EXECUTIVE SUMMARY

A subsurface investigation was performed by Enviropro, Inc. at Mercury Aerospace Fasteners, located at 11800 Sherman Way in North Hollywood, California. The investigation was requested by the California Regional Water Quality Control Board, Los Angeles Region, to comply with AB-1803 Follow-Up Program, Phase I.

The investigation was conducted on 2/17/89 and involved the drilling of three test borings. Results of the drilling, soil sampling, and chemical analyses indicate that soil in the area of Borings A2 and A3-A contains petroleum hydrocarbons at concentrations up to 144 ppm. Purgeable halocarbon levels are also detected at the three locations.

2.0 INTRODUCTION

The subject site is located at 11800 Sherman Way in North Hollywood, California.

On February 17, 1989, three test borings were drilled at locations shown on Drawing 1. The test borings were drilled to a depth of 10 feet and soil samples were collected at depths of 1', 6' and 10' in boring A1 and at 1', 5' and 10' in borings A2 and A3A.

Results of the soil sampling and analyses conducted indicate the presence of petroleum hydrocarbons and purgeable halocarbons in the environment.

This report discusses the results of the subsurface investigation conducted by Enviropro, Inc. at the above-referenced site.

3.0 ENVIROPRO, INC. DRILLING AND SOIL SAMPLING PROCEDURES

All drilling was accomplished using an 8-inch hollow stem auger drilling rig. Soil samples were obtained using a split spoon sampler and a standard 140-pound hammer with a 30-inch drop. After each sample was obtained, the split spoon and sampling tubes were cleaned using steam at 350°F and rinsed with distilled, deionized water to eliminate the possibility of cross-contamination between sampling intervals. After each borehole was drilled, all augers, split spoons and sampling tubes were steam cleaned as described above to prevent cross-contamination between borings.

During the drilling operation, a Photovac TIP II photoionization detector was used to obtain readings of volatile hydrocarbons to be used for qualitative evaluation of the soil samples. These readings are included in the boring logs. All soil samples designated for chemical

analysis were retained inside the stainless steel sampling tubes during retrieval. The ends of each tube were tightly sealed with a sheet of teflon tape and a polyethylene cap. The tubes were then placed inside a ziplock plastic bag. A soil sampling label was placed on the outside of each bag and the bagged samples with labels were placed inside a second ziplock plastic bag.

All prepared soil samples were immediately placed on ice inside a styrofoam cooler, and stored under refrigeration for delivery to a state-certified laboratory for chemical analysis.

4.0 DRILLING AND SOIL SAMPLING RESULTS

On February 17, 1989, three test borings were drilled to a depth of 10 feet at the locations shown on Drawing 1. The boring logs are included in Appendix A.

Soil samples were collected at 1', 6' and 10' at boring A1 and at 1', 5' and 10' in borings A2 and A3A. The samples were transported as per EPA protocol to American Analytics, a state-certified laboratory for chemical analysis. All samples collected were analyzed for Halogenated Volatile Organics, Aromatic Volatile Organics, and Total Recoverable Petroleum Hydrocarbons (TPH) using EPA Methods 8010, 8020, and 418.1, respectively.

The chain-of-custody record and laboratory reports with QA/QC data for this investigation, are included in Appendix B.

Table 4.1 summarizes results for the chemical analyses conducted on soil samples collected at 11800 Sherman Way, North Hollywood, California.

5.0 CONCLUSIONS

Laboratory data indicate that TPH concentrations at the one-foot depth in borings A2 and A3A are 144 ppm and 108 ppm respectively. These concentrations appear to be restricted to the near surface at both locations because TPH levels decrease below 100 ppm at greater depth. TPH concentrations are not detected below six feet in boring A1. The TPH found in shallow depths near the surface may be attributable to asphalt fractions mobilized by other solvents and/or rain water.

TABLE 4.1

Summary of Results of Chemical Analysis
on Soil Samples Collected at
Mercury Aerospace Fasteners
11800 Sherman Way, North Hollywood, California

EPA Test Method	Boring Numbers and Sample Depths								
	A1			A2			A3A		
	1'	6'	10'	1'	5'	10'	1'	5'	10'
<u>418.1(mg/kg)</u>									
TPH	16.4	26.2	n.d.	144	16.4	16.4	108	16.4	13.1
<u>8020 (mcg/kg)</u>									
Benzene	2.7	n.d.	n.d.	n.d.	n.d.	n.d.	n.d.	n.d.	n.d.
Toluene	4.8	2.9	n.d.	n.d.	n.d.	n.d.	3.0	2.4	2.0
Ethyl Benzene	3.4	2.3	3.0	n.d.	n.d.	n.d.	n.d.	n.d.	n.d.
Total Xylenes	13.1	8.2	6.2	n.d.	n.d.	n.d.	7.5	6.4	4.5
<u>8010 (mcg/kg)</u>									
1,1,-Dichloro-ethylene	8.4	8.8	29.3	55.2	n.d.	n.d.	8.3	5.6	3.2
1,1,1-Trichloro-ethane	12.3	2.0	n.d.	61.2	n.d.	n.d.	1.1	n.d.	n.d.
Tetrachloro-ethylene	n.d.	n.d.	n.d.	24.3	n.d.	n.d.	n.d.	n.d.	n.d.
Trichloro-ethylene	n.d.	n.d.	n.d.	n.d.	4.3	n.d.	n.d.	n.d.	n.d.

n.d. = none detected

Only detected pollutants are shown in table.

Aromatic volatile compounds are present in low concentrations at boring locations A1 and A3A. Benzene is detected at the one-foot depth in boring A1 at a concentration of 2.7 ppb.

Purgeable halocarbons are detected at all three locations. The highest concentration detected (55.2 ppb) is in boring A2 at the one-foot depth. Concentrations of 1,1-Dichloroethylene in boring A1 range from 8.4 ppb to 29.3 ppb at depths of one foot and ten feet, respectively. Other chlorinated volatile compounds detected at the site include 1,1,1-Trichloroethane, Tetrachloroethylene and Trichloroethylene.

APPENDIX A
Test Boring Logs

Field Drilling Record of Boring # A1 Page 1 of 1

Project Name: Mercury Aerospace Project No. 35401
Location: 11800 Sherman Way, North Hollywood, California
Date: February 16, 1989
Field Geologist: Charles Schwarz
Drilling Co. Datum Exploration
Drilling Technique: Hollow Stem Auger Diameter: 7"
Sampler: 1.5 Standard Penetrometer
Checked by Geologist: H. Kues License No.: EG 264
Authorized Signature: Charles Schwarz #4624 RC

Depth of Sample Blow Description (Color, Moisture,
Sample C=Chem. Count Grain Size, Sorting, etc.)
(Ft.) G=Geo. per 6"

1	C,G	12-6-9	Dark yellowish-brown very fine sand, well-sorted, but occasional small pebble, loose, damp. PID = 32
5	G	5-5-5	Moderate yellowish-brown, coarse sand, ill-sorted, 10% granules and pebble gravel, no silt, loose, damp. PID = 33
6	C,G	3-5-5	Moderate yellowish-brown fine to medium sand, ill-sorted, 15% coarser grains, some silt, loose to some friable clusters, damp. PID = 43
10	C,G	---	Same as previous, but no silt and an occasional pebble. PID = 39

END OF HOLE

Notes:

1. No ground water encountered.
2. Hole backfilled with spoils and tamped.

Field Drilling Record of Boring # A2 Page 1 of 1

Project Name: Mercury Aerospace Project No. 35401
Location: 11800 Sherman Way, North Hollywood, California
Date: February 16, 1989
Field Geologist: Charles Schwarz
Drilling Co. Datum Exploration
Drilling Technique: Hollow Stem Auger Diameter: 7"
Sampler: 1.5 Standard Penetrometer
Checked by Geologist: H. Kues License No.: EG 264
Authorized Signature: Charles Schwarz #4624 RC

Depth of Sample Blow Description (Color, Moisture,
Sample C=Chem. Count Grain Size, Sorting, etc.)
(Ft.) G=Geo. per 6"

1	C,G	4-5-5	Dark yellowish-brown silty sand, very ill-sorted, some pebble gravel, loose to slightly friable, damp. PID = 39
5	C,G	3-4-6	Moderate yellowish-brown fine sand, ill-sorted, loose, damp. PID = 42
10	C,G	12-9-10	Pale yellowish-brown coarse sand, ill-sorted, 15% coarser fragments to pebble size, 20% finer grained, no silt, loose, damp. PID = 39

END OF HOLE

Notes:

1. No ground water encountered.
2. Hole backfilled with spoils and tamped.

Field Drilling Record of Boring # A3A Page 1 of 1

Project Name: Mercury Aerospace Project No. 35401
Location: 11800 Sherman Way, North Hollywood, California
Date: February 16, 1989
Field Geologist: Charles Schwarz
Drilling Co. Datum Exploration
Drilling Technique: Hollow Stem Auger Diameter: 7"
Sampler: 1.5 Standard Penetrometer
Checked by Geologist: H. Kues License No.: EG 264
Authorized Signature: Charles Schwarz #4624 BC

Depth of Sample (Ft.)	Sample C=Chem. G=Geo.	Blow Count per 6"	Description (Color, Moisture, Grain Size, Sorting, etc.)
1	C,G	4-4-5	Dark yellowish-brown silty fine <u>sand</u> , well-sorted, loose to friable, damp. PID = 46
5	C,G	5-3-3	Moderate yellowish-brown fine to medium <u>sand</u> , ill-sorted, some silt, loose to some friability, damp. PID = 39
10	C,G	---	Moderate yellowish-brown medium to coarse <u>sand</u> , well-sorted, few pebbles, loose, damp. PID = 6.5

END OF HOLE

Notes:

1. No ground water encountered.
2. Hole backfilled with spoils and tamped.

APPENDIX B

**Copy of Original Chain-of-Custody Record
and Laboratory Reports**

Project No.	Client	ANALYSIS REQUIRED				Instructions/Comments
Sample Number	Date	Time	Depth Below Grade	Sample Type	Suspected Contaminant	
35401	Mercury Aerospace					
Charles Schwab						
A1-1	2/16/89	1047	1'	Soil		
A1-6	2/16/89	1117	6	Soil		
A1-10	2/16/89	1124	10	Soil		
A2-1	2/16/89	1135	1	Soil		
A2-5	2/16/89	1145	5	Soil		
A2-10	2/16/89	1155	10	Soil		
A3A-1	2/16/89	1230	1	Soil		
A3A-5	2/16/89	1250	5	Soil		
A3A-10	2/16/89	1300	10	Soil		
SAMPLE INTEGRITY - TO BE FILLED BY RECEIVING LAB Samples Intact Yes No Samples Properly Cooled Yes No Samples Accepted Yes No If Not, Why						
Samples Placed In Lab Refrigerator Prior To Analysis Yes No						
ENVIROPRO, INC. P.O. # 1574- P35401 See Report Instructions						

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AMERICAN ANALYTICS
9765 Eton Avenue
Chatsworth, CA 91311
(818) 998-7197
FAX (818) 998-7258

LABORATORY ANALYSIS RESULTS

Client: Enviropo, Inc.
Project No.: 35401
Project Name: Mercury Aerospace
Sample Matrix: Soil
Method: EPA 418.1

DOHS Certified #: 265
Date Received: 2/17/89
Units: mg/Kg
Date Reported: 2/28/89

~~~~~  

| Compounds | Results | Detection Limits |
|-----------|---------|------------------|
|-----------|---------|------------------|

  
~~~~~

Total Recoverable
Petroleum Hydrocarbons

<u>AA ID#</u>	<u>Client ID#</u>		
9-0196	A1-1	16.4	10
9-0197	A1-6	26.2	10
9-0198	A1-10	n.d.	10
9-0199	A2-1	144	10
9-0200	A2-5	16.4	10
9-0201	A2-10	16.4	10
9-0202	A3A-1	108	10
9-0203	A3A-5	16.4	10
9-0204	A3A-10	13.1	10

~~~~~  
n.d. = none detected

  
Ek Han Kwee, Ph.D.  
Technical Director

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9765 Eton Avenue  
Chatsworth, CA 91311  
(818) 998-7197  
FAX (818) 998-7258

LABORATORY ANALYSIS RESULTS

Client: Enviropro, Inc.  
Project No.: 35401  
Project Name: Mercury Aerospace  
Sample Matrix: Soil  
Method: EPA 8010

DOHS Certified #: 265

Date Received: 2/17/89

Units: mcg/Kg

Date Reported: 2/28/89

~~~~~

AA ID#	Client ID	Compounds	Results
9-0196	A1-1	1,1-Dichloroethylene	8.4
		1,1,1-Trichloroethane	12.3
9-0197	A1-6	1,1-Dichloroethylene	8.8
		1,1,1-Trichloroethane	2.0
9-0198	A1-10	1,1-Dichloroethylene	29.3
9-0199	A2-1	1,1-Dichloroethylene	55.2
		1,1,1-Trichloroethane	61.2
		Tetrachloroethylene	24.3
9-0200	A2-5	Trichloroethylene	4.3
9-0201	A2-10	n.d.	

~~~~~  
n.d. = none detected

  
Ek Han Kwee, Ph.D.  
Technical Director

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Chatsworth, CA 91311  
(818) 998-7197  
FAX (818) 998-7258

LABORATORY ANALYSIS RESULTS

Client: Enviropro, Inc.  
Project No.: 35401  
Project Name: Mercury Aerospace  
Sample Matrix: Soil  
Method: EPA 8010

DOHS Certified #: 265

Date Received: 2/17/89

Units: mcg/Kg

Date Reported: 2/28/89

~~~~~

AA ID#	Client ID	Compounds	Results
9-0202	A3A-1	1,1-Dichloroethylene	8.3
		1,1,1-Trichloroethane	1.1
9-0203	A3A-5	1,1-Dichloroethylene	5.6
9-0204	A3A-10	1,1-Dichloroethylene	3.2

~~~~~  
n.d. = none detected

  
Ek Han Kwee, Ph.D.  
Technical Director

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9765 Eton Avenue  
Chatsworth, CA 91311  
(818) 998-7197  
FAX (818) 998-7258

LABORATORY ANALYSIS RESULTS

Client: Enviropo, Inc.  
Project No.: 35401  
Project Name: Mercury Aerospace  
Sample Matrix: Soil  
Method: EPA 8010, QC  
Dilution Factor: 2.5

DOHS Certified #: 265  
Date Analyzed: 2/24/89  
Client ID#: N/A  
Units: %  
Date Reported: 2/28/89  
AA ID#: N/A

| Compounds                   | Spike<br>Recovery | Acceptance<br>Criteria |
|-----------------------------|-------------------|------------------------|
| Chloromethane               | ----              | D - 193                |
| Vinyl chloride              | 97                | 28 - 163               |
| Bromomethane                | 101               | D - 144                |
| Trichlorofluoromethane      | 62                | 21 - 156               |
| 1,1-Dichloroethylene        | 92                | 28 - 167               |
| Methylene chloride          | 81                | 25 - 162               |
| trans-1,2-Dichloroethylene  | 97                | 38 - 155               |
| 1,1-Dichloroethane          | 96                | 47 - 132               |
| Chloroform                  | 45                | 49 - 133               |
| 1,1,1-Trichloroethane       | 81                | 41 - 138               |
| Carbon tetrachloride        | 92                | 43 - 143               |
| 1,2-Dichloroethane          | 92                | 51 - 147               |
| Trichloroethylene           | 80                | 35 - 146               |
| 1,2-Dichloropropane         | 91                | 44 - 156               |
| Bromodichloromethane        | 92                | 42 - 172               |
| 2-Chloroethyl vinyl ether   | 94                | 14 - 186               |
| trans-1,3-Dichloropropylene | 96                | 22 - 178               |
| 1,1,2-Trichloroethane       | 96                | 39 - 136               |
| Tetrachloroethylene         | 88                | 26 - 162               |
| Chlorobenzene               | 96                | 38 - 150               |
| 1,1,1,2-Tetrachloroethane   | 92                | 8 - 184                |
| Bromoform                   | 92                | 13 - 159               |
| 1,3-Dichlorobenzene         | 99                | 7 - 187                |
| 1,4-Dichlorobenzene         | 95                | 42 - 143               |
| 1,2-Dichlorobenzene         | 93                | D - 208                |

Duplicate was run on sample #9-0209

"D" = Detected

  
Ek Han Kwee, Ph.D.  
Technical Director

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(818) 998-7197  
FAX (818) 998-7258

LABORATORY ANALYSIS RESULTS

Client: Enviropro, Inc.  
Project No.: 35401  
Project Name: Mercury Aerospace  
Sample Matrix: Soil  
Method: EPA 8020

DOHS Certified #: 265

Date Received: 2/17/89

Units: mcg/Kg

Date Reported: 2/28/89

~~~~~

AA ID#	Client ID	Compounds	Results
9-0196	A1-1	Benzene	2.7
		Toluene	4.8
		Ethyl Benzene	3.4
		Total Xylenes	13.1
9-0197	A1-6	Toluene	2.9
		Ethyl Benzene	2.3
		Total Xylenes	8.2
9-0198	A1-10	Ethyl Benzene	3.0
		Total Xylenes	6.2

~~~~~  
n.d. = none detected

  
Ek Han Kwee, Ph.D.  
Technical Director

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AMERICAN ANALYTICS  
9765 Eton Avenue  
Chatsworth, CA 91311  
(818) 998-7197  
FAX (818) 998-7258

LABORATORY ANALYSIS RESULTS

Client: Enviropro, Inc.  
Project No.: 35401  
Project Name: Mercury Aerospace  
Sample Matrix: Soil  
Method: EPA 8020

DOHS Certified #: 265

Date Received: 2/17/89

Units: mcg/Kg

Date Reported: 2/28/89

| AA ID# | Client ID | Compounds     | Results |
|--------|-----------|---------------|---------|
| 9-0199 | A2-1      | n.d.          |         |
| 9-0200 | A2-5      | n.d.          |         |
| 9-0201 | A2-10     | n.d.          |         |
| 9-0202 | A3A-1     | Toluene       | 3.0     |
|        |           | Total Xylenes | 7.5     |
| 9-0203 | A3A-5     | Toluene       | 2.4     |
|        |           | Total Xylenes | 6.4     |
| 9-0204 | A3A-10    | Toluene       | 2.0     |
|        |           | Total Xylenes | 4.5     |

n.d. = none detected

  
Ek Han Kwee, Ph.D.  
Technical Director

AMERICAN ANALYTICS  
9765 Eton Avenue  
Chatsworth, CA 91311  
(818) 998-7197  
FAX (818) 998-7258

LABORATORY ANALYSIS RESULTS

Client: Enviropro, Inc.  
Project No.: 35401  
Project Name: Mercury Aerospace  
Sample Matrix: Soil  
Method: EPA 8020, QC  
Dilution Factor: 2.5

DOHS Certified #: 265  
Date Analyzed: 2/24/89  
Client ID#: N/A  
Units: %  
Date Reported: 3/21/89  
AA ID#: N/A

| Compounds           | Spike<br>Recovery | Acceptance<br>Criteria |
|---------------------|-------------------|------------------------|
| Benzene             | 109               | 39 - 150               |
| Chlorobenzene       | 94                | 55 - 135               |
| 1,2-Dichlorobenzene | 70                | 37 - 154               |
| 1,3-Dichlorobenzene | 42                | 50 - 141               |
| 1,4-Dichlorobenzene | 35                | 42 - 143               |
| Ethylbenzene        | 104               | 32 - 160               |
| Toluene             | 88                | 46 - 148               |

Duplicate was run on sample #9-0209

  
Ek Han Kwee, Ph.D.  
Technical Director

# REPORT

## PHASE II SUBSURFACE INVESTIGATION (WELL INVESTIGATION REPORT)

AT

### MERCURY AEROSPACE FASTENERS NORTH HOLLYWOOD, CALIFORNIA

Prepared for:

Mercury Aerospace Fasteners  
11800 Sherman Way  
North Hollywood, California 91609-9759

Document (E)

Prepared by:

GeoSyntec Consultants  
(formerly GSI Environmental)  
16541 Gothard Street, Suite 211  
Huntington Beach, California 92647  
(714) 843-6866

5 February 1991

GeoSyntec Consultants Project Number P1590

000350

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Samples from Test Boring B4

## 1. INTRODUCTION

### 1.1 Terms of Reference

This report documents the results of a Phase II Subsurface Investigation conducted at the Mercury Aerospace Fasteners facility located at 11800 Sherman Way, North Hollywood, Los Angeles County, California. This investigation was conducted on 24 and 25 October 1990 in general accordance with the requirements set by the State of California Regional Water Quality Control Board (CRWQCB) [1989, 1990]. This work was conducted and this report was prepared by GeoSyntec Consultants (formerly GSI Environmental) for Mercury Aerospace Fasteners (MAF) in response to a request by the CRWQCB dated March 20, 1990. This report was prepared by Bert S. Palmer, Ph.D., R.E.P., and Haydar Azzouz of GeoSyntec Consultants. It was reviewed by Allen E. Blodgett, P.E., also of GeoSyntec Consultants, in accordance with the internal review policy of the company.

### 1.2 Organization of the Report

This report is organized as follows:

- In Section 2, background information, including site location and previous site activities and investigations, is presented.
- In Section 3, the objectives and scope of work are presented. In addition, variances from the work plan approved by the CRWQCB [GeoSyntec Consultants, 1990] are outlined in Section 3.
- In Section 4, field activities performed or monitored by GeoSyntec Consultants personnel are presented, along with the results of the field investigation.
- In Section 5, laboratory chemical test methods and results are summarized.

- In Section 6, interpretations of the field and laboratory data collected thus far are presented along with conclusions.

## 2. BACKGROUND INFORMATION

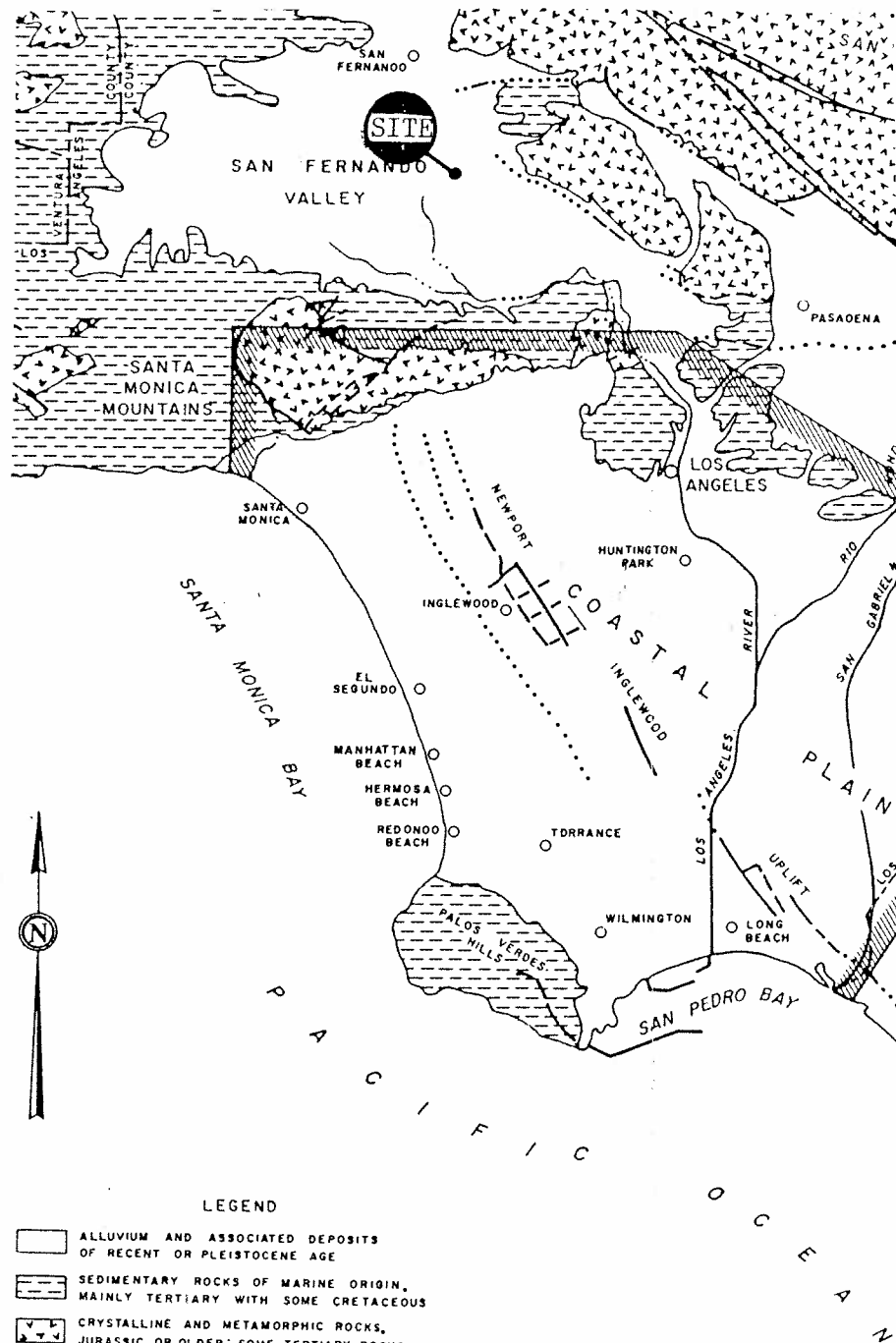
### 2.1 Site Location

The site is located at 11800 Sherman Way, North Hollywood, County of Los Angeles, California. The City of North Hollywood is located in the center to eastern portion of the San Fernando Valley. The general location of the MAF facility within the San Fernando Valley is shown in Figure 2-1.

### 2.2 Previous Site Activities and Investigations

Based on available information, the facility has been owned, since its construction in 1972, by Messrs. Woodhouse and Birken. The facility has been used to manufacture fasteners for the aerospace industry. The facility was originally operated by Woodhouse and Birken and later by Microdot Kaynard. In 1987, Mercury Aerospace Fasteners took over the lease and the manufacturing operations at the facility. The exact type of chemicals used at the site as well as waste handling procedures prior to 1987 are not available. However, it is likely that degreasers; cutting, tapping and machine oils; solvents; and thinners were used by Microdot Kaynard and Woodhouse and Birken during manufacturing operations prior to 1987.

The site is still used by MAF to manufacture fasteners for the aerospace industry. Based on a conversation with MAF personnel (MAF, 1990), naphetic solvents such as Chevron Thinner 350B; cutting, tapping, and/or machine oils; and 1,1,1-Trichloroethane (TCA) are used by MAF in the fasteners manufacturing process. Chemicals are stored in the south parking area in 55-gallon (210-liter) drums placed in two bermed containment areas. These two concrete containment areas were constructed in 1987 by MAF immediately after starting their operation at the site.



SITE LOCATION MAP  
MERCURY AEROSPACE FASTENERS  
NORTH HOLLYWOOD, CALIFORNIA  
DECEMBER 1990

(after CDWR, 1961)



**GEOSYNTEC CONSULTANTS**

|              |        |
|--------------|--------|
| FIGURE NO.   | 2-1    |
| PROJECT NO.  | P1590  |
| DOCUMENT NO. | C90052 |
| PAGE NO.     | 4      |

Because of evidence of chemical compounds in drinking water wells located in the San Fernando Valley, the CRWQCB is implementing the AB1803 follow-up program and the Well Investigation Program (WIP). The intent of the WIP is to determine and evaluate the potential sources of groundwater contamination in the San Fernando Valley. One aspect of the WIP is to systematically inspect and investigate industrial facilities located in the San Fernando Valley.

On 31 August 1988, the MAF was inspected by CRWQCB staff members. As a result of the CRWQCB staff visit, a Phase I Subsurface Investigation was conducted at this site on 17 February 1989 by Enviropro (1989). The Phase I Investigation required by the CRWQCB consisted of drilling three test borings to maximum depths of 10 ft (3 m), and collecting soil samples at depths of 1, 5, and 10 ft (0.3, 1.5, and 3 m) in each test boring. Test borings were reportedly placed where the ground surface appeared to have been distressed and stained. Thus, concentrations of chemicals in the soil were considered by CRWQCB to most likely be the highest at the locations of the test borings.

The results of the laboratory chemical analyses reported by Enviropro (1989), are presented in Table 2-1. Low (144 mg/kg or less) concentrations of halogenated and aromatic volatile organic compounds and petroleum hydrocarbon were present in the soil samples. The concentrations of most of these chemicals decreased with depth except for 1,1-Dichloroethylene whose concentration increased with depth in Test Boring A1.

TABLE 2-1

Summary of Results of Chemical Analyses  
on Soil Samples Collected at  
Mercury Aerospace Fasteners  
North Hollywood, California  
December 1990  
After Enviropro [1989]

| EPA Test Method       | Boring Numbers and Sample Depths |      |      |      |      |      |     |      |      |    |    |     |
|-----------------------|----------------------------------|------|------|------|------|------|-----|------|------|----|----|-----|
|                       | A1                               |      |      | A2   |      |      | A3A |      |      |    |    |     |
|                       | 1'                               | 6'   | 10'  | 1'   | 5'   | 10'  | 1'  | 5'   | 10'  | 1' | 5' | 10' |
| <u>418.1 (mg/kg)</u>  |                                  |      |      |      |      |      |     |      |      |    |    |     |
| TPH                   | 16.4                             | 26.2 | ND   | 144  | 16.4 | 16.4 | 108 | 16.4 | 13.1 |    |    |     |
| <u>8020 (mcg/kg)</u>  |                                  |      |      |      |      |      |     |      |      |    |    |     |
| Benzene               | 2.7                              | ND   | ND   | ND   | ND   | ND   | ND  | ND   | ND   | ND | ND | ND  |
| Toluene               | 4.8                              | 2.9  | ND   | ND   | ND   | ND   | 3.0 | 2.4  | 2.0  |    |    |     |
| Ethyl Benzene         | 3.4                              | 2.3  | 3.0  | ND   | ND   | ND   | ND  | ND   | ND   | ND | ND | ND  |
| Total Xylene          | 13.1                             | 8.2  | 6.2  | ND   | ND   | ND   | 7.5 | 6.4  | 4.5  |    |    |     |
| <u>8010 (mcg/kg)</u>  |                                  |      |      |      |      |      |     |      |      |    |    |     |
| 1,1,-Dichloroethylene | 8.4                              | 8.8  | 29.3 | 55.2 | ND   | ND   | 8.3 | 5.6  | 3.2  |    |    |     |
| 1,1,1-Trichloroethane | 12.3                             | 2.0  | ND   | 61.2 | ND   | ND   | 1.1 | ND   | ND   | ND | ND | ND  |
| Tetrachloroethylene   | ND                               | ND   | ND   | 24.3 | ND   | ND   | ND  | ND   | ND   | ND | ND | ND  |
| Trichloroethylene     | ND                               | ND   | ND   | ND   | 4.3  | ND   | ND  | ND   | ND   | ND | ND | ND  |

ND = Not Detected.

### 3. OBJECTIVE AND SCOPE OF WORK

#### 3.1 Objective

Following review of the Phase I Subsurface Investigation Report, the CRWQCB requested that a Phase II Subsurface Investigation be conducted at the MAF facility. Requirements for the Phase II Subsurface Investigation were described by the CRWQCB (1989, 1990) and are included in Appendix A. These requirements provided general guidelines to perform the proposed Phase II Subsurface Investigation activities in compliance with CRWQCB specifications [CRWQCB, 1989, 1990].

The objective of the investigation is to evaluate if potential leakage or historical spillage of material at the MAF facility surface may act as a source of groundwater contamination. Based on the CRWQCB (1990), an area containing low levels of chemicals is no longer considered a potential "source" and a threat to groundwater if it can be established that at least 30 to 40 ft (9.1 to 12.2 m) of soil with non-detected concentrations of chemicals exist between the potential "source" and the groundwater.

#### 3.2 Scope of Work

In order to accomplish the objective listed above, it was planned to perform the following work tasks:

##### Task 1: Field Work Preparation

Task 1 included:

- the final selection of four test boring locations,
- the approval by CRWQCB staff of each test boring location, and
- the preparation of a health and safety plan.

## Task 2: Field Exploration

Task 2 consisted of:

- drilling four test borings at the selected locations to depths of approximately 55 ft (17 m),
- collecting soil samples from each test boring at 5 ft (1.5 m) depth intervals or at changes in lithology,
- recording test boring logs,
- backfilling the test borings with bentonite grout, and
- placing soil cuttings in labelled 55-gallon (210-liter) drums.

## Task 3: Laboratory Analytical Testing

Task 3 included:

- transporting the soil samples to an analytical laboratory, and
- performing the chemical analyses on the soil samples.

## Task 4: Report

Task 4 consisted of preparing a report summarizing the data obtained during the field exploration and laboratory testing program and presenting discussions, interpretations, and conclusions.

A detailed description of each work task was provided in the work plan dated 11 May 1990 and submitted to MAF by GeoSyntec Consultants [GeoSyntec Consultants, 1990]. This work plan was approved by Mr. David Bacharowski of the CRWQCB in a letter dated 16 May 1990 (See CRWQCB letter dated 16 May 1990, included in Appendix A).

### 3.3 Variance From Scope of Work

The planned location of Test Boring B4 was inaccessible to the drill rig due to the lack of space between the eastern fence and the berm of the southernmost containment area. The issue was brought to the attention of Ms. Laurie Morgan of the CRWQCB who requested that Test Boring B4 be hand-augered to a depth of only 10 ft (3 m).

## 4. FIELD INVESTIGATION

### 4.1 Site Health and Safety Plan

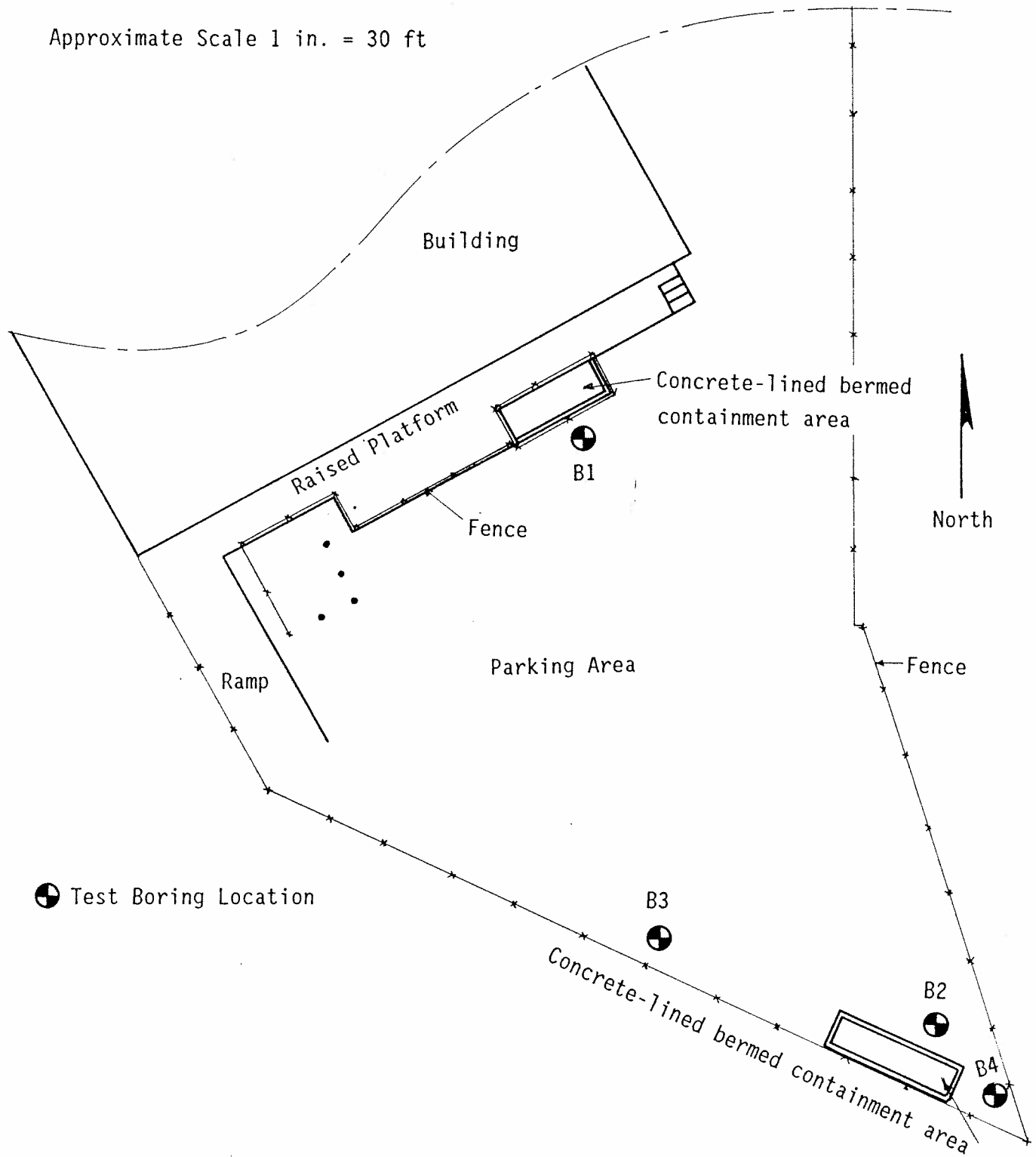
Prior to the start of field work, a site-specific health and safety plan was prepared by GeoSyntec Consultants. This plan was prepared in accordance with Occupational Safety and Health Administration (OSHA) regulations [Federal Register, December 19, 1986, Part 1910.120]. The plan covered: site characterization, site control, training, medical monitoring, personal protective equipment, field monitoring, material handling, emergency response, and subcontractors. Personnel participating in the field activities had received the required health and safety training. A health and safety meeting was held prior to the start of field activities.

### 4.2 Test Boring Procedures

#### 4.2.1 Locations of Test Borings

Three test borings (B1, B2, and B3) are located within 3 ft (1 m) of Test Borings A1, A2, and A3A, respectively, drilled in 1989 by Enviropro [1989]. Test Boring B4 was located east of the southernmost containment area, as requested by the CRWQCB. The locations of Test Borings B1, B2, B3, and B4, drilled by GeoSyntec Consultants, are shown in Figure 4-1. The locations of Test Borings A1, A2, and A3A, previously drilled by Enviropro [1989] and Test Borings B1, B2, B3, and B4 are shown in Figure 4-2. Locations of all test borings were approved on site by Ms. Laurie Morgan of the CRWQCB who partially monitored field activities (See CRWQCB letter dated 22 December 1989 included in Appendix A).

Approximate Scale 1 in. = 30 ft



TEST BORING LOCATIONS  
MERCURY AEROSPACE FASTENERS  
NORTH HOLLYWOOD, CALIFORNIA

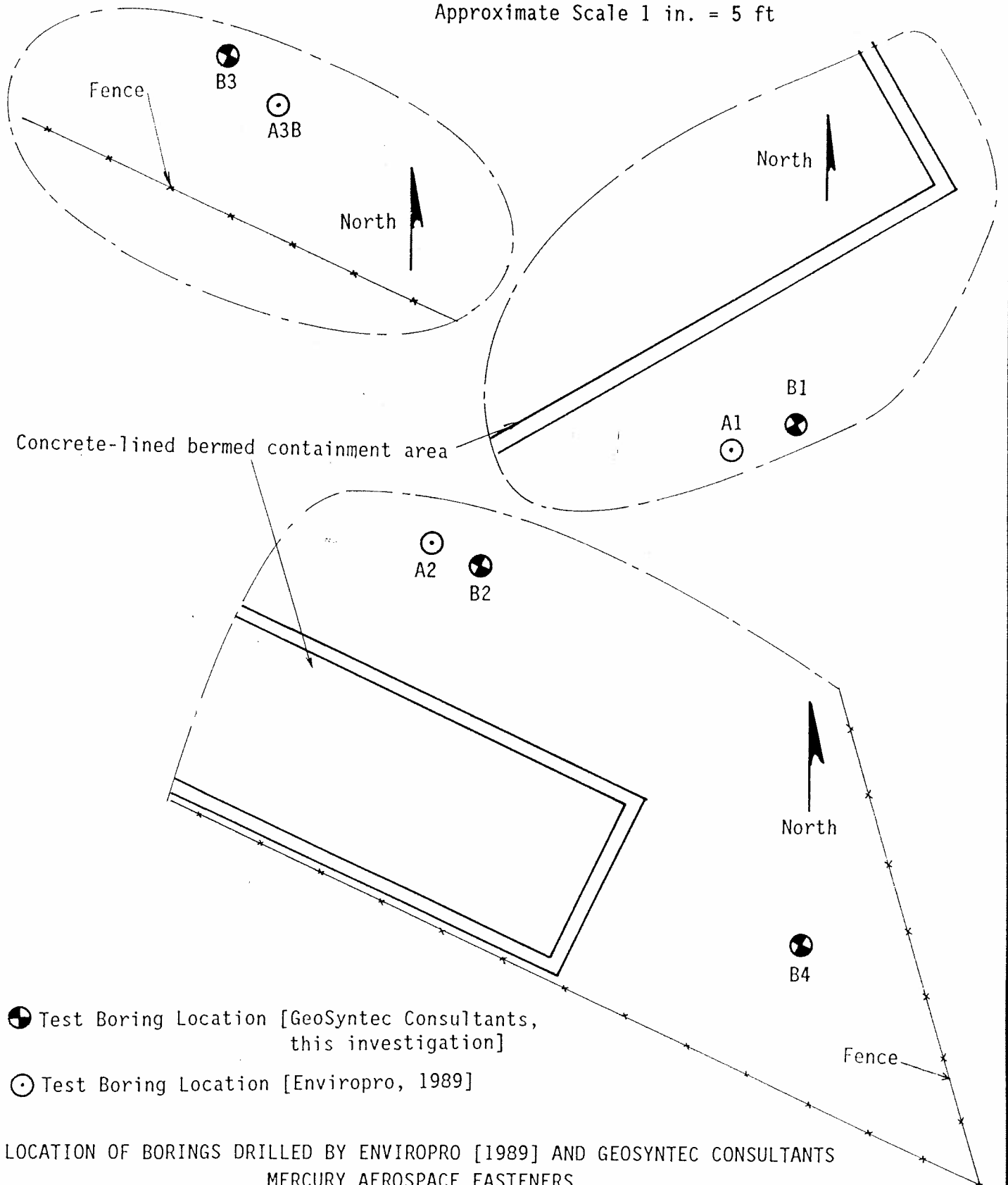


GEOSYNTEC CONSULTANTS

|              |        |
|--------------|--------|
| FIGURE NO.   | 4-1    |
| PROJECT NO.  | P1590  |
| DOCUMENT NO. | C90052 |
| PAGE NO.     |        |

01025CA

Approximate Scale 1 in. = 5 ft



⊗ Test Boring Location [GeoSyntec Consultants,  
this investigation]

⊙ Test Boring Location [Enviropro, 1989]

LOCATION OF BORINGS DRILLED BY ENVIROPRO [1989] AND GEOSYNTec CONSULTANTS  
MERCURY AEROSPACE FASTENERS  
NORTH HOLLYWOOD, CALIFORNIA



GeoSYNTEC CONSULTANTS

|              |        |
|--------------|--------|
| FIGURE NO.   | 4-2    |
| PROJECT NO.  | P1590  |
| DOCUMENT NO. | C90052 |
| PAGE NO.     |        |

#### 4.2.2 Test Boring Drilling

Test Borings B1, B2, and B3 were drilled on 24 and 25 November 1990 to depths of 55 ft (17 m). Test Boring B4 was hand-augered to a depth of 10 ft (3 m). To reduce the risk of disrupting underground features, the first 5 ft (1.5 m) of Test Borings B1, B2, and B3 were advanced using a 3.25 in.- (8.3 cm-) diameter hand auger. Following hand augering, the test borings were drilled using a truck-mounted B61 drill rig with continuous flight hollow stem 6 in.- (15 cm-) diameter augers. The augers were steam-cleaned between each test boring to minimize the possibility of cross-contamination between test borings. Soil cuttings were contained in 55 gallon (210 liter) drums, and stored on-site for subsequent handling by MAF. Each drum was labelled with the test boring number, the depth range, and the content description. Test borings were backfilled with a 22%-by-weight bentonite grout mixture. A cement grout was used to fill up the top of Test Borings B1 and B2 which had subsided approximately 7 ft (2.1 m). A patch of asphalt was then placed to cover each test boring.

#### 4.2.3 Soil Sampling

Soil samples were collected from each test boring every 5 ft (1.5 m). Sample collection started at a depth of 10 ft (3 m) in Test Borings B1, B2, and B3. Soil samples were collected by driving a split-barrel sampler into the soil. The split-barrel sampler had a 3 in.- (7.6 cm-) outside diameter and was equipped with 2.5 in.- (6.4 cm-) outside diameter, 6 in. (15 cm) long brass liners. Samples were collected at depths of 1, 5, and 10 ft (0.3, 1.5, and 3.0 m) in Test Boring B4. Samples were collected using a hand sampler containing one 2 in.- (5 cm-) diameter and 6 in.- (12 cm-) long brass liner. Before each sampling event, the sampler and liners were washed with an Alconox<sup>TM</sup> solution, rinsed twice with tap water, and then rinsed with deionized water to limit the potential for cross-contamination between sampling events. Three soil samples were collected at each sampling depth, provided that the sample recovery was sufficient. One sample was collected for

laboratory chemical analysis, one sample was archived, and the third sample was observed on-site for soil classification purposes. A sample of the deionized water used to wash the sampler and brass liners prior to sampling events was also sent to the laboratory for chemical analyses.

Brass liners were sealed with aluminum foil and plastic end caps and taped on the ends with duct tape to minimize volatilization of potentially present volatile organic compounds. Samples were labeled, sealed with custody tags, wrapped in a Ziplock<sup>TM</sup> plastic bag, and placed in an ice chest containing blue ice for transport to a laboratory certified by the California Department of Health and Safety, following proper chain-of-custody procedures. A custody tag was also placed on each ice chest.

#### 4.2.4 Soil Logging

Test borings were continuously logged in the field by a GeoSyntec Consultants geotechnical engineer or geologist using the Unified Soil Classification System in general accordance with American Society for Testing and Materials (ASTM) Method D2488 [1990]. Sample number, sampling depth, sample recovery, blow count, sample description, and other pertinent information were recorded on boring logs.

#### 4.3 Test Boring Results

Logs of the test borings drilled by GeoSyntec Consultants at the MAF facility are presented in Appendix B. The subsurface is predominantly composed of yellowish brown, slightly moist, fine to coarse sands with silt. The contacts between layers of coarse and fine sands seem to be gradational. Gravels and cobbles up to 5 in. (12.7 cm) in diameter were regularly encountered in the test borings and resulted in difficulties to recover samples. The mineralogic composition of the observed gravels and cobbles suggests igneous or metamorphic source rocks. Such rocks exist in the nearby Santa Monica and San Gabriel mountains. The logs of Test Borings B1 and B2 also indicate the presence of thin, discontinuous

sandy silt layers. The subsurface of the MAF site is typical of Quaternary alluvial flood plain deposits which predominately consist of cobbles, gravels, and sands with minor to moderate amounts of silts and clays.

Groundwater was not encountered in the test borings. Depth to groundwater in Wells No. 4929 and 4907-K, located within a one mile (1.6 km) radius from the MAF site, was 256.1 ft (78.1 m) in April 1989 and 249 ft (75.9 m) in June 1986 [LACDPW, 1990], respectively.

## 5. LABORATORY CHEMICAL ANALYSIS

### 5.1 Chain of Custody Procedures

To assure custody of the samples during collection, transport, and shipping, each sample was labelled and recorded in a chain of custody record. A custody tag was also placed on each sample. Sample number and depth, sample type, container type, sampling data, and required analysis was recorded on the chain of custody. The chain of custody forms were signed and dated by the GeoSyntec Consultants sampler. Samples were considered to be in custody when the samples were in actual possession, in view, or in a locked area.

### 5.2 Laboratory Selection and Testing Methods

Soil samples were transported within two days following collection to Curtis and Tompkins Ltd., a chemical laboratory certified by the California Department of Health Services. The laboratory QA/QC program included provisions for:

- laboratory organization;
- sample management;
- analytical methodology;
- analytical performance;
- instrument calibration;
- soil sample analysis;
- water sample trip blank supply;
- laboratory QA/QC definitions and calculations;
- corrective action procedures;
- laboratory data collection and storage requirements;
- sample requirements;
- sample handling; and
- documentation.

The laboratory was informed to sample aliquots from the center of the brass liners for chemical analysis and provide practical quantitation limits of 5 to 10 parts per billion, as requested by CRWQCB staff.

Soil samples collected in Test Borings B1, B3, and B4 were analyzed for purgeable halogenated volatile organics by USEPA Method 8010, aromatic volatile organics by USEPA Method 8020, and Total Recoverable Petroleum Hydrocarbon (TRPH) using USEPA Method 418.1. Soil samples collected in Test Boring B2 were not analyzed for aromatic volatile organics because a previous site investigation [Enviropro, 1989] had established that aromatic volatile organics were not detected in the area of Test Borings B2 and A2 [CRWQCB, 1990]. Soil samples from Test Boring B2 were thus only analyzed for TRPH and purgeable halogenated volatile organics. In addition, the sample of deionized water collected in the field and a trip blank water sample supplied by the laboratory were analyzed by USEPA Method 624 for purgeable organics. The sample of deionized water collected in the field was also analyzed for TRPH by USEPA method 418.1.

### 5.3 Laboratory Testing Results

Results of the laboratory chemical analyses conducted on soil samples collected in Test Borings B1, B2, B3, and B4 are summarized in Tables 5-1, 5-2, 5-3, and 5-4, respectively. Complete laboratory results including quality assurance/quality control data are included in Appendix C.

Both water samples did not contain detectable concentrations of purgeable organics. The concentration of TRPH in the sample of deionized water collected in the field was below detection limit. These results of chemical analysis of the water samples indicate that the deionized water used to decontaminate the sampling equipment did not contain detectable concentrations of TRPH and purgeable organics. In addition, transport in the ice chest as well as the sampling environment did not introduce purgeable organics compounds in the blank sample.

TABLE 5-1

Summary of Results of Chemical Analyses Conducted  
on Soil Samples Collected from Test Boring B1  
Mercury Aerospace Fasteners  
North Hollywood, California  
December 1990

| Compound (units)    | Depth (ft) |     |        |    |    |    |    |    |    |    |    |     |
|---------------------|------------|-----|--------|----|----|----|----|----|----|----|----|-----|
|                     | 1          | 5   | 10     | 15 | 20 | 25 | 30 | 35 | 40 | 45 | 50 | 55  |
| TRPH (ppm)          | 16*        | 26* | ND*/ND | ND | ND | ND | 35 | NS | ND | ND | 17 | 450 |
| Benzene (ppb)       | 3*         | ND  | ND*/ND | ND | ND | ND | ND | NS | ND | ND | ND | ND  |
| Toluene (ppb)       | 5*         | 3*  | ND*/ND | ND | ND | ND | ND | NS | ND | ND | ND | ND  |
| Ethyl Benzene (ppb) | 3*         | 2*  | 3*/ND  | ND | ND | ND | ND | NS | ND | ND | ND | ND  |
| Xylene (ppb)        | 13*        | 8*  | 6*/ND  | ND | ND | ND | ND | NS | ND | ND | ND | ND  |
| DCE (ppb)           | 8*         | 9*  | 29*/ND | ND | ND | ND | ND | NS | ND | ND | ND | ND  |
| TCA (ppb)           | 12*        | 2*  | ND*/ND | ND | ND | ND | ND | NS | ND | ND | ND | ND  |

ND = Not Detected; Compound-specific detection limits are shown in Appendix C and [Enviropro, 1989]

NS = No Sample recovered

\* After Enviropro [1989]

TRPH = Total Recoverable Petroleum Hydrocarbon

DCE = 1,1-Dichloroethylene

TCA = 1,1,1-Trichloroethane

TABLE 5-2  
Summary of Results of Chemical Analyses Conducted  
on Soil Samples Collected from Test Boring B2  
Mercury Aerospace Fasteners  
North Hollywood, California  
December 1990

| Compound (units) |      | Depth (ft) |        |    |    |    |    |    |    |    |    |     |    |
|------------------|------|------------|--------|----|----|----|----|----|----|----|----|-----|----|
|                  |      | 1          | 5      | 10 | 15 | 20 | 25 | 30 | 35 | 40 | 45 | 50  | 55 |
| TRPH (ppm)       | 144* | 16*        | 16*/ND | ND | 23 | ND | ND | ND | 26 | 17 | 21 | 880 |    |
| DCE (ppb)        | 55*  | ND*        | ND*/ND | ND | ND | ND | ND | ND | ND | ND | ND | ND  |    |
| TCA (ppb)        | 61*  | ND*        | ND*/ND | ND | ND | ND | ND | ND | ND | ND | ND | 6   |    |
| PCE (ppb)        | 24*  | ND*        | ND*/ND | ND | ND | ND | ND | ND | ND | ND | ND | ND  |    |
| TCE (ppb)        | ND*  | 4*         | ND*/ND | ND | ND | ND | ND | ND | ND | ND | ND | ND  |    |

ND = Not Detected; Compound-specific detection limits are shown in Appendix C and [Enviropro, 1989]

\* After Enviropro [1989]

TRPH = Total Recoverable Petroleum Hydrocarbon

DCE = 1,1-Dichloroethylene

TCA = 1,1,1-Trichloroethane

PCE = Tetrachloroethylene

TCE = Trichloroethylene

TABLE 5-3  
Summary of Results of Chemical Analyses Conducted  
on Soil Samples Collected from Test Boring B3  
Mercury Aerospace Fasteners  
North Hollywood, California  
December 1990

| Compound (units) |  | Depth (ft) |     |        |    |    |    |    |    |    |    |    |    |
|------------------|--|------------|-----|--------|----|----|----|----|----|----|----|----|----|
|                  |  | 1          | 5   | 10     | 15 | 20 | 25 | 30 | 35 | 40 | 45 | 50 | 55 |
| TRPH (ppm)       |  | 108*       | 16* | 13*/ND | ND | ND | ND | ND | 13 | ND | 23 | ND | ND |
| Benzene (ppb)    |  | ND*        | ND* | ND*/ND | ND | ND | ND | ND | ND | ND | 21 | ND | ND |
| Toluene (ppb)    |  | 3*         | 2*  | 2*/ND  | ND | ND | ND | ND | ND | ND | 14 | ND | ND |
| Xylene (ppb)     |  | 8*         | 6*  | 5*/ND  | ND | ND | ND | ND | ND | ND | ND | ND | ND |
| DCE (ppb)        |  | 8*         | 6*  | 3*/ND  | ND | ND | ND | ND | ND | ND | ND | ND | ND |
| TCA (ppb)        |  | 1*         | ND* | ND*/ND | ND | ND | ND | ND | ND | ND | ND | ND | ND |

ND = Not Detected; Compound-specific detection limits are shown in Appendix C and [Enviropro, 1989]

\* After Enviropro [1989]

TRPH = Total Recoverable Petroleum Hydrocarbon

DCE = 1,1-Dichloroethylene

TCA = 1,1,1-Trichloroethane

TABLE 5-4  
 Summary of Results of Chemical Analyses Conducted  
 on Soil Samples Collected from Test Boring B4  
 Mercury Aerospace Fasteners  
 North Hollywood, California  
 December 1990

| Compound (units) | Depth (ft) |    |    |
|------------------|------------|----|----|
|                  | 1          | 5  | 10 |
| TRPH (ppm)       | 300        | ND | ND |
| Benzene (ppb)    | 8          | ND | ND |

ND = Not Detected; Compound-specific detection limits are shown in Appendix C  
 TRPH = Total Recoverable Petroleum Hydrocarbon

## 6. INTERPRETATION OF RESULTS AND CONCLUSIONS

The results of the chemical analyses presented in Section 5 can be summarized as follows:

- Concentrations of TRPH ranged from 300 ppm to less than 1 ppm at depths of 1 to 10 ft (0.3 to 3 m). Concentrations of TRPH were generally below the detection limit (1 ppm) at depths ranging from 15 to 50 ft (4.5 to 15 m). However, concentrations of TRPH increased to 450 ppm and 880 ppm at a depth of 55 ft (17 m) in Test Boring B1 and B2, respectively.
- Concentrations of aromatic volatile organic compounds were less than 13 ppb at depths ranging from 1 to 10 ft (0.3 to 3 m). Concentrations of aromatic volatile organic compounds were below detection limits at depths ranging from 15 to 55 ft (4.5 to 16.5 m) except at a depth of 45 ft (13.5 m) where benzene and toluene were detected in Test Boring B3 at concentrations equal to 21 ppb and 14 ppb, respectively.
- Concentrations of purgeable halogenated volatile organic compounds were less than 61 ppb at depths ranging from 1 to 10 ft (0.3 to 3 m). Concentrations of purgeable halogenated volatile organic compounds were below detection limits at depths ranging from 15 to 55 ft (4.5 to 16.5 m) except at a depth of 55 ft (16.5 m) where 1,1,1-trichloroethane (TCA) was detected at a concentration of 1 ppb above the detection limit in Test Boring B2.

Using the results of the chemical analyses presented in Section 5 and summarized herein, three areas were delineated within the subsurface including:

- Area No. 1, which extends from the surface to a depth of 15 ft (4.5 m),

- Area No. 2, which extends from a depth of 15 ft (4.5 m) to a depth of approximately 45 ft (13.5 m), and
- Area No. 3, which extends from a depth of 45 ft (13.5 m) to the maximum drilled depth of 55 ft (16.5 m).

In Area No. 1, concentrations of TRPH and volatile organic compounds are low and decrease as the depth increases. Concentrations of TRPH and volatile organic compounds are all below detection limits at the bottom of Area No. 1 (depth equal to 15 ft).

In Area No. 2, concentrations of TRPH are generally below detection limits. Concentrations of volatile organic compounds are all below the detection limit.

In Area No. 3, concentrations of TRPH increase as the depth increases to a maximum concentration of 880 ppm in Test Boring B2. Concentrations of volatile organic compounds are generally below detection limit except at two sampling locations.

The distribution of chemical concentrations in Area No. 1 is typical of concentration distributions due to the presence of a surface source. Surface sources could be small localized leaks originating from equipment or drums previously stored in unlined and unbermed containment areas, leaks from parked vehicles, or leaching of the asphaltic surface in the parking area. A comparison of the chemical results obtained by Enviropro [1989] with the data obtained in this study indicates that chemical concentrations in Area No. 1 have decreased with time. This decrease of chemical concentration with time is likely due to natural biodegradation processes. It also indicates that recharge of the surface chemical source has probably not occurred. Therefore, the source may have been due to previous spills which would have occurred many years ago. Waste containment practices implemented by MAF have probably minimized if not eliminated further recharge of the surface sources.

The distribution of chemicals in Areas No. 2 and 3 is not as conventional as the distribution of chemicals in Area No. 1. One or a combination of phenomenae may provide an explanation for the observed chemical distribution in Areas No. 2 and 3. The phenomenae which may explain this observed chemical distribution are presented hereafter.

- The migration of chemicals from a potential surface source or from Area No. 1 through the subsurface did not follow a straight vertical pathway, but rather, followed a complex network of channeled pathways. The vertical, straight test borings and discrete sampling locations may have intercepted the channelized flow pathway in a random fashion. This would explain the apparent observed distribution of chemicals within Areas No. 2 and 3. However, it does not explain the increase in chemical concentration in Area No. 3 of the subsurface.
- Although the subsurface is mainly composed of fine to coarse sand with gravel, thin silt lenses and localized increases in silt and clay content were noticed in some of the samples collected in the subsurface. The greater affinity of chemicals to fine grained material such as clay rather than to coarse grain material such as sand may have resulted in an heterogenous residual chemical concentration distribution after natural bioremediation took place. However, the potential occurrence of this phenomenon does not explain the increase in chemical concentration in Area No. 3 of the subsurface.
- Area No. 2, area of non-detected concentrations of chemicals, separates Area No. 3 and Area No. 1 which both exhibit the highest concentration of chemicals. Therefore, the chemicals which have been detected in Area No. 3 may not originate from Area No. 1 but rather from an off-site source. Some chemicals may have migrated laterally from neighboring sites on a perched water table or on the surface of a low-permeability layer. Presence of low concentrations of chemicals in the soil may be due to the upward

migration of soil gas laden with vapors of volatile organic compounds from a source located below a depth of 55 ft (17 m).

Based on the present knowledge of the site and site area, it does not appear that random drilling of additional test borings will yield valuable information regarding the potential contribution of the MAF facility to groundwater contamination in the San Fernando Valley. It is recommended, before conducting further site exploration activities, to locate and evaluate potential sources of chemicals around the MAF facility and further evaluate the general stratigraphy below and around the MAF facility. Such an investigation could be initiated by obtaining and reviewing records of investigative work conducted near the MAF facility. Such records are typically available in the office of regulatory agencies such as the CRWQCB, the County of Los Angeles Department of Health Services, the State of California Department of Health Services, or the local fire department.

## REFERENCES AND BIBLIOGRAPHY

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CRWQCB (1989), Letter from the California Regional Water Quality Control Board, Los Angeles Region, dated December 22, 1989, to Mercury Aerospace Fasteners, North Hollywood, California.

CRWQCB (1990), Personal Communication with Mr. David Bacharowski and Ms. Laurie Morgan of the Regional Water Quality Control Board during a meeting held on April 12, 1990.

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LACDPW (1990), Personal Communication with Staff of the Los Angeles County Department of Public Works, Hydraulic and Water Conservation Division, by Bert Palmer, on May 9, 1990.

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## **APPENDIX A**

### **CRWQCB REQUIREMENTS PHASE II SUBSURFACE INVESTIGATION MERCURY AEROSPACE FASTENERS NORTH HOLLYWOOD, CALIFORNIA**

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD—  
LOS ANGELES REGION

101 Centre Plaza Drive  
Monterey Park, California 91754-2156  
(213) 266-7500

RECEIVED

DEC 23 1989

Mercury Aerospace

December 22, 1989

Mr. Jerome Flament  
MERCURY AEROSPACE FASTENERS  
11800 Sherman Way  
Burbank, CA 91609-9759

SITE INVESTIGATION - WELL INVESTIGATION PROGRAM  
(FILE NO. AB104.0728)

We have reviewed your Final Report for the Phase I Subsurface Investigation, from Enviropro, Inc., dated May 1, 1989. The reported analytical test results have identified the presence of petroleum hydrocarbons, aromatic volatile organic compounds, and halogenated volatile organic compounds in the soil at the site.


The aromatic volatile organic compounds identified include benzene, toluene, ethyl benzene, and xylene. The halogenated volatile organic compounds identified include 1,1-dichloroethylene, 1,1,1-trichloroethane, tetrachloroethylene, and trichloroethylene. These constituents are directly related to chemicals/waste materials stored or used on-site. The downward extent of contaminants within each area investigated has not been identified.

In order to further determine the vertical and lateral extent of these contaminants, as well as any potential impacts from the company's operations to the underlying groundwater, you are directed to submit to this Regional Board a work plan for conducting a Phase II Subsurface Investigation. This work plan must address all of the items contained on the enclosed Work Plan Requirements for Initial Subsurface Investigations, as well as the Supplementary Subsurface Investigation Workplan Requirements, with the following modifications:

1. A sufficient number of additional soil test borings must be drilled in all of the areas previously investigated. Soil test borings for the next phase of investigation must be completed to a minimum depth of 40 feet below land surface.
2. Since Boring 3A was drilled adjacent to and west of the propane tank, instead of adjacent to and east of Containment Area No. 2, as specified in the work plan for the phase I investigation, the phase II work plan must include an additional boring at this location.

3. Groundwater monitoring wells are not required during this phase of the investigation.

Your Phase II Subsurface Investigation Work Plan addressing the areas listed above is due to this Regional Board by January 30, 1990. If you have any questions concerning this matter, please contact me at (213) 266-7539, or Laurie Morgan at (213) 266-7541.

  
DAVID A. BACHAROWSKI  
Environmental Specialist IV

cc: Ms. Alisa Greene, U.S. EPA Region IX  
Mr. Bill Jones, L.A. Co. Dept. of Health Services

Enclosures

STATE OF CALIFORNIA  
California Regional Water Quality Control Board  
Los Angeles Region

WORKPLAN REQUIREMENTS  
for  
INITIAL SUBSURFACE ENGINEERING/GEOLOGIC SOIL INVESTIGATION  
(WELL INVESTIGATION PROGRAM)

The objective of this engineering/geological investigation is to evaluate potential waste discharges which may impact ground water. Your workplan should include, but not be limited to, the following:

SITE INFORMATION: Characterize past and present specific business activities. List any previous businesses at the site. Describe storage, handling, use, and disposal procedures for chemicals, primarily chlorinated organics or aromatic solvents. Give name, address, and phone number of any landlord/lessor.

FACILITY MAP: Identify on a scaled facility map all potential sources for contamination, past and present. Examples include: chemical and waste storage, transfer and use areas including tanks and piping, clarifiers, sumps, pits. Indicate dates of completion of buildings or pavings where possible.

SITE SOILS AND GEOLOGY: Determine if site discharges have entered the vadose zone, define sources, and provide background geological data for the area. Use EPA or State Department of Health Services guidelines.

1. Provide rationale for the number and location of borings. Plot on facility map.
2. Provide reasons for proposed depth of each boring if less than the generally required depth of 40 feet. Additional depths may be required if ground water is encountered or if there is obvious contamination in the boring.
3. Identify proposed construction methods for borings.
4. Log all borings to provide characteristics of unconsolidated material per Unified Soil Classification System as well as all other appropriate information.
5. Provide a sampling plan to include equipment and procedures for collection and handling of geologic materials. A sampling interval of 5 feet, each change in lithology or changes in observed contamination is required starting at just below surface or surface covering.

6. Comply with chain of custody procedures. Discrete, undisturbed samples will be taken, sealed, and transported to the laboratory for analyses. Samples submitted for laboratory analyses are not to be used for field screening.
7. The proposed laboratory must be State Department of Health Services registered for each analytical procedure specified. EPA Methods 8240 or 8010/8020 are required. Supplement with Methods necessary for any site chemicals, past and present.
8. At a minimum, EPA sample holding times and conditions must be observed. However, samples held over seven (7) days may be suspect and not considered representative of site conditions.
9. EPA practical quantitation limits (5 to 10  $\mu\text{g/kg}$  for selected VOC) are required. Analytical results must indicate detection limits and whether a chemical potentially exists (trace).
10. Laboratory QA/QC requirements include: field, sample and reagent blanks, calibration check standards, spiked samples, total recoverables, laboratory control standard, and duplicates.

GROUNDWATER (HYDROGEOLOGY): Ground water must be sampled if any boring encounters a saturated zone. Site specific exceptions may be made in consultation with Board staff.

1. Provide a contingency plan for conversion of borings that encounter saturated zones to ground water sampling wells. This should include permitting and well design, construction, and development specifications.
2. Provide protocols for field analysis, water sampling, handling and transport.
3. EPA Methods 601/602 or appropriate 500 Series Methods must be used supplemented by appropriate Methods for nitrates and any chemicals used on site.

ADDITIONAL REQUIREMENTS:

1. Submit a copy of the results of any previous subsurface investigations conducted at the site.
2. Submit a time schedule. The proposed activities must be completed within 6 to 8 weeks of plan approval.
3. A CALIFORNIA REGISTERED GEOLOGIST OR ENGINEER OR CERTIFIED ENGINEERING GEOLOGIST WITH FIVE YEARS SOILS OR HYDROGEOLOGIC EXPERIENCE SHALL DIRECT OR CONDUCT THESE INVESTIGATIONS AND PROPERLY SIGN OFF THE FINAL REPORT FOR THE REPORT TO BE ACCEPTED AND APPROVED.
4. Work shall not be proceed without prior approval and staff notification at least one week prior to initiating field work.

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD  
LOS ANGELES REGION

SUPPLEMENTARY SUBSURFACE INVESTIGATION  
(WELL INVESTIGATION PROGRAM)

DATA REQUIREMENTS: All work plan requirements for the initial subsurface investigations must also be met in conducting this additional investigation.

UNSATURATED ZONE (SOILS)

1. Ascertain lateral and vertical extent of contamination.
2. Determine soil properties which affect contaminant mobility in the vadose zone. Relate the specific residual contaminants with their potential long term effect on ground water quality.

SATURATED ZONE (WATER)

1. Determine specific aquifer properties for correct siting of monitoring well(s). Use of piezometer clusters is encouraged to ascertain aquifer properties.
2. Determine lateral and vertical extent of contaminant plume.

PROCEDURES

SOIL BORING

1. Justify and plot proposed location(s) for soil sampling.
2. Explain proposed sampling depth and drilling method.
3. Specify that boring logs will be signed off by appropriately registered or certified personnel.

DRILLING/SOIL SAMPLING

1. Describe sampling procedures:
  - o Method and equipment proposed to collect the samples with minimal loss of volatiles.
  - o Sampling interval (5 feet or at significant changes in soil/lithology as noted on the boring logs).
  - o Number and type of soil samples (only discrete, undisturbed samples are acceptable).
2. If possible, take water samples from any boring which penetrates the uppermost saturated zone after converting to a monitoring well or piezometer.

MONITORING WELL CONSTRUCTION/DEVELOPMENT

1. Include in the well design, specifications/construction details such as:
  - o Casing and screen materials, sand pack, and construction method,
  - o Proposed depth and type of annular seal,
  - o Time for cement to set before commencing monitoring.
2. Provide for appropriate logging.
3. Characterize aquifer materials for proper selection of filter pack and screen. Only commercially slotted screens are acceptable. Less than 10-20% of the filter pack should enter

- the well. This screen should extend a minimum of 20 feet below and 10 feet above the water table.
4. The boring should not penetrate a competent clay layer below the saturated zone.
  5. Casing must be suspended and centralized such that it is not resting against the sides nor bottom of the hole prior to fixing in place.
  6. Place grout of either cement or cement/bentonite in an appropriate manner to avoid bridging.
  7. Establish benchmarks relative to mean sea level. Provide benchmark location and survey date. Measure water levels to 0.01 foot. Also provide well location using UTM Coordinates.
  8. Describe methods to develop well such that the waters sampled are representative of the formation water. The water sampled must have less than 10 ppm settleable solids.

#### WATER SAMPLING

1. Describe details of sample collection:
  - o Water sampling devices to be used,
  - o Procedures to minimize loss of samples by adsorption and/or volatilization,
  - o Purge techniques, tests (temp., pH, conductivity) to assure the collection of a representative water sample.
2. Describe methods for handling the samples collected.

#### SAMPLE ANALYSES

##### GENERAL

1. The laboratory must be certified by the California Department of Health Services for the specific required procedures.
2. Laboratory procedures and QA\QC sheets must be submitted with the results in the technical report.
3. Limits of detection must approach EPA's practical quantitation limits.
4. Proper chain of custody procedures must be used.

SOILS: Specify EPA Methods to determine existing facility contaminants, also use the required EPA Methods 8240 or 8010/8020 to quantify volatile organics to EPA's practical quantitation limits. Specify detection limits.

WATER: Specify EPA Methods to quantify contaminants found in soil, also use EPA Methods 601/602 or 624. Specify detection limits. Submit samples to the laboratory in unfiltered form and report sample turbidity.

#### REPORTS

Four copies of final reports should be submitted with all information requested.

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD—  
LOS ANGELES REGION

101 CENTRE PLAZA DRIVE  
MONTEREY PARK, CALIFORNIA 91754-2156  
(213) 266-7500



May 16, 1990

Mr. Jerome Flament  
MERCURY AEROSPACE FASTENERS, INC.  
11800 Sherman Way  
Burbank, CA 91609-9759

WELL INVESTIGATION PROGRAM - SUBSURFACE SOILS INVESTIGATION WORK  
PLAN (FILE NO. 104.0728)

We are in receipt of the Subsurface Soil Investigation Work Plan, dated May 11, 1990, prepared for your facility by GSI Environmental. We have reviewed and evaluated your proposal, and have no objections to its implementation, provided that all work is completed as specified in your proposal, and complies with the requirements listed below, as discussed in a telephone conversation between Dr. Bertrand Palmer of GSI Environmental and Laurie Morgan of this Board's staff on May 15, 1990.

1. A surface sample at approximately one (1) foot below ground surface, is to be obtained at soil test boring B-4 for laboratory analysis.
2. All soil test borings must be backfilled using a bentonite grout type mixture.
3. Soil cuttings that are hazardous waste must be labeled according to state and federal regulations, and must be disposed of legally, accompanied by a manifest.
4. All test boring locations must be verified in the field with Regional Board staff, the day that drilling commences on-site.
5. Field investigation activities must be directly overseen by the Registered/Certified geotechnical personnel that will be signing the final report.
6. All wastewaters generated from steam cleaning and decontamination operations must be adequately contained on-site, and disposed of at a legal disposal site.

Your final report, containing the results of the Subsurface Soils Investigation, is due to this Regional Board by June 29, 1990.

Mr. Jerome Flament  
Page 2

Please contact my staff at least seven days prior to commencement of work, so that we may schedule a representative to be present. If you have any questions concerning this matter, please contact me at (213) 266-7539, or Laurie Morgan at (213) 266-7541.

*David A. Bacharowski*

DAVID A. BACHAROWSKI  
Environmental Specialist IV

cc: Ms. Alisa Greene, U.S. EPA Region IX  
Mr. Bill Jones, Los Angeles County Department of Health  
Services  
Mr. Jorge Leon, State Water Resources Control Board Attorney,  
Office of the Chief Counsel  
Mr. Peter Sacripanti, Esq., Shearman & Sterling  
Messrs. Irving Berken and Ralph Woodhouse  
✓ Dr. Bert S. Palmer, Ph.D., R.E.P.

# **APPENDIX B**

## **LOGS OF TEST BORINGS**

# BORING RECORD

PROJECT: MERCURY PHASE II SUBSURFACE INVESTIGATION

LOCATION: 11800 SHERMAN WAY, NORTH HOLLYWOOD, CA 91609-9759

PROJECT NO.: P1590

DRILLER: BEYLIK DRILLING, INC.

TASK NO.: 02

RIG TYPE: B61 HOLLOW STEM AUGER

DATE: 10-25-90

BORING DIAMETER: 6 INCHES

GEOLOGIST: B. PALMER/H. AZZOUZ

BORING NO.: 1

| DEPTH<br>(FT) | SAMPLE<br>NO. | BLOWS PER<br>6 INCHES | %<br>RECOVERY | DESCRIPTION<br>AND CLASSIFICATION                                                                                                                                  | COMMENTS                                                                                                      |
|---------------|---------------|-----------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
|               |               |                       |               | Asphalt: top 2 inches                                                                                                                                              | Hand-augered top 5 feet                                                                                       |
| 5             |               |                       |               | Brownish-yellow, fine-medium sand with about 10% silt. Intermittent gravel, typically 1"-2", but up to 5" in diameter, slightly moist, loose-medium dense. [SW-SM] |                                                                                                               |
| 10            | B1-S1         | 7/16/22               | 80%           | At 8': Same as above except sand is medium-coarse.                                                                                                                 | Gravels of igneous/metamorphic composition, probably derived from the Santa Monica and San Gabriel Mountains. |
| 15            | B1-S2         | 11/16/21              | 95%           | Same as 5'                                                                                                                                                         |                                                                                                               |
| 20            | B1-S3         | 11/21/27              | 95%           | Same as 5' except sand is medium-coarse.                                                                                                                           |                                                                                                               |
| 25            | B1-S4         | 7/11/16               | 95%           | At 25': Sandy silt layer, about 2' thick [ML]                                                                                                                      | No gravels encountered                                                                                        |
| 30            | B1-S5         | 17/26/33              | 30%           | Same as 5' except sand is medium-coarse.                                                                                                                           | Gravels observed.<br>(see description above)                                                                  |
| 35            | B1-S6         | 19/25/35              | 0%            | Same as 5'                                                                                                                                                         | Gravel occurrence increases:<br>harder to drill.                                                              |
| 40            | B1-S7         | 15/21/27              | 50%           | Same as 5' except sand is medium-coarse.                                                                                                                           |                                                                                                               |
| 45            | B1-S8         | 39/37/45              | 40%           | Same as 5'                                                                                                                                                         |                                                                                                               |
| 50            | B1-S9         | 26/31/29              | 80%           | Same as 5'                                                                                                                                                         | Gravel occurrence increases:<br>harder to drill.                                                              |
| 55            | B1-S10        | 27/36/42              | 80%           | Same as 5' except sand is medium-coarse.                                                                                                                           | Termination depth: 55'<br>No ground water encountered.                                                        |

# **BORING RECORD**

PROJECT: MERCURY PHASE II SUBSURFACE INVESTIGATION  
LOCATION: 11800 SHERMAN WAY, NORTH HOLLYWOOD, CA 91609-9759  
PROJECT NO.: P1590 DRILLER: BEYLIK DRILLING, INC.  
TASK NO.: 02 RIG TYPE: B61 HOLLOW STEM AUGER  
DATE: 10-25-90 BORING DIAMETER: 6 INCHES  
GEOLOGIST: B. PALMER/H. AZZOUZ BORING NO.: 2

| DEPTH<br>(FT) | SAMPLE<br>NO. | BLOWS PER<br>6 INCHES | %<br>RECOVERY | DESCRIPTION<br>AND CLASSIFICATION                                                                                                                                        | COMMENTS                                                                                                                                                              |
|---------------|---------------|-----------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|               |               |                       |               | Asphalt: top 2"                                                                                                                                                          |                                                                                                                                                                       |
| 5             |               |                       |               | Brownish-yellow, fine-medium sand with silt. Intermittent gravels encountered with typical diameters of 1"-2", but up to 5". Slightly moist, loose-medium dense. [SW-SM] | Very difficult to hand-auger top 5' due to gravels.<br>Gravels of igneous/meta-morphic composition, probably derived from the Santa Monica and San Gabriel Mountains. |
| 11.5          | B2-S1         | 7/11/21               | 90%           |                                                                                                                                                                          |                                                                                                                                                                       |
| 15            | B2-S2         | 11/19/24              | 60%           |                                                                                                                                                                          |                                                                                                                                                                       |
| 20            | B2-S3         | 22/25/34              | 30%           | Same as above except sand grain size is medium-coarse.                                                                                                                   |                                                                                                                                                                       |
| 25            | B2-S4         | 11/14/24              | 70%           |                                                                                                                                                                          |                                                                                                                                                                       |
| 30            | B2-S5         | 12/17/24              | 60%           |                                                                                                                                                                          |                                                                                                                                                                       |
| 35            | B2-S6         | 9/20/32               | 100%          | Sandy silt layer, 2' thick, moderately moist [ML]                                                                                                                        |                                                                                                                                                                       |
| 40            | B2-S7         | 17/25/37              | 70%           | Brownish-yellow, medium-coarse sand with silt. Intermittent gravels with typical diameters of 1"-2", but up to 5" cobbles. Slightly moist. Loose-medium dense.           |                                                                                                                                                                       |
| 45            | B2-S8         | 18/30/40              | 30%           |                                                                                                                                                                          |                                                                                                                                                                       |
| 50            | B2-S9         | 20/34/42              | 40%           |                                                                                                                                                                          |                                                                                                                                                                       |
| 55            | B2-S10        | 25/36/44              | 75%           |                                                                                                                                                                          | Termination depth: 55'<br>No ground water encountered.                                                                                                                |

# BORING RECORD

PROJECT: MERCURY PHASE II SUBSURFACE INVESTIGATION

LOCATION: 11800 SHERMAN WAY, NORTH HOLLYWOOD, CA 91609-9759

PROJECT NO.: P1590

DRILLER: BEYLIK DRILLING, INC.

TASK NO.: 02

RIG TYPE: B61 HOLLOW STEM AUGER

DATE: 10-24-90

BORING DIAMETER: 6 INCHES

GEOLOGIST: B. PALMER/H. AZZOUZ

BORING NO.: 3

| DEPTH<br>(FT) | SAMPLE<br>NO. | BLOWS PER<br>6 INCHES | %<br>RECOVERY | DESCRIPTION<br>AND CLASSIFICATION                                                                                                                                  | COMMENTS                                               |
|---------------|---------------|-----------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
|               |               |                       |               | Top 2": asphalt                                                                                                                                                    | Hand-augered to 5'.                                    |
| 5             |               |                       |               | Brownish-yellow, fine-medium sand with silt, 10-20% gravel, typically 2"-3" in diameter; cobbles up to 5" in diameter, slightly moist, loose-medium dense [SW/SM]. |                                                        |
| 10            |               |                       |               |                                                                                                                                                                    |                                                        |
| 11            | B3-S1         | 25/35/43              | 80%           |                                                                                                                                                                    |                                                        |
| 15            | B3-S2         | 7/17/28               | 80%           |                                                                                                                                                                    |                                                        |
| 20            | B3-S3         | 8/11/24               | 80%           |                                                                                                                                                                    |                                                        |
| 25            | B3-S4         | 22/32/45              | 80%           |                                                                                                                                                                    |                                                        |
| 30            | B3-S5         | 25/36/43              | 80%           |                                                                                                                                                                    |                                                        |
| 35            | B3-S6         | 17/26/37              | 80%           | Sand component becomes very fine to fine with increasing amounts of silt (about 30%). [SM]                                                                         |                                                        |
| 40            | B3-S7         | 20/26/35              | 70%           |                                                                                                                                                                    |                                                        |
| 45            | B3-S8         | 17/24/40              | 20%           |                                                                                                                                                                    |                                                        |
| 50            | B3-S9         | 24/31/40              | 85%           |                                                                                                                                                                    |                                                        |
| 55            | B3-S10        | 26/34/47              | 80%           |                                                                                                                                                                    | Termination depth: 55'<br>No ground water encountered. |

# **BORING RECORD**

PROJECT: MERCURY PHASE II SUBSURFACE INVESTIGATION  
 LOCATION: 11800 SHERMAN WAY, NORTH HOLLYWOOD, CA 91609-9759  
 PROJECT NO.: P1590 DRILLER: NOT APPLICABLE  
 TASK NO.: 02 RIG TYPE: HAND AUGERED  
 DATE: 10-25-90 BORING DIAMETER: 4 INCHES  
 GEOLOGIST: B. PALMER/H. AZZOUZ BORING NO.: 4

| DEPTH<br>(FT) | SAMPLE<br>NO. | BLOWS PER<br>6 INCHES | %<br>RECOVERY | DESCRIPTION<br>AND CLASSIFICATION                                                                                                       | COMMENTS                                                                                     |
|---------------|---------------|-----------------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 1             | B4-S1         | NA                    | 100%          | Brownish-yellow, fine-medium sand with silt. Intermittent gravels and cobbles up to 5" in diameter, slightly moist, loose-medium dense. | Hand-augered to 10' due to location which was not accessible to truck mounted B61 drill rig. |
| 5             | B4-S2         | NA                    | 100%          |                                                                                                                                         |                                                                                              |
| 10            | B4-S3         | NA                    | 100%          |                                                                                                                                         |                                                                                              |
| 15            |               |                       |               |                                                                                                                                         | Termination depth: 10'<br>No ground water encountered.                                       |
| 20            |               |                       |               |                                                                                                                                         |                                                                                              |
| 25            |               |                       |               |                                                                                                                                         |                                                                                              |
| 30            |               |                       |               |                                                                                                                                         |                                                                                              |
| 35            |               |                       |               |                                                                                                                                         |                                                                                              |
| 40            |               |                       |               |                                                                                                                                         |                                                                                              |
| 45            |               |                       |               |                                                                                                                                         |                                                                                              |
| 50            |               |                       |               |                                                                                                                                         |                                                                                              |
| 55            |               |                       |               |                                                                                                                                         |                                                                                              |
|               |               |                       |               |                                                                                                                                         |                                                                                              |

## **APPENDIX C**

### **LABORATORY RESULTS**



Curtis & Tompkins, Ltd., Analytical Laboratories, Since 1878

1250 S. Boyle Ave., Los Angeles, CA 90023, Phone (213) 269-7421, Fax (213) 268-5328

DATE RECEIVED: 10/26/90

DATE REPORTED: 11/08/90

PAGE 1 OF 60

LAB NUMBER: 200911

CLIENT: GSI ENVIRONMENTAL

REPORT ON: THIRTY-TWO SOIL AND TWO WATER SAMPLES

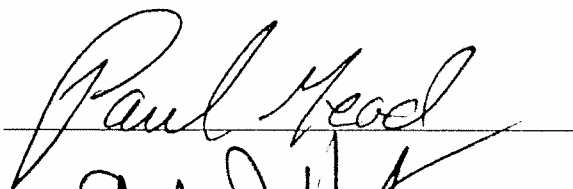
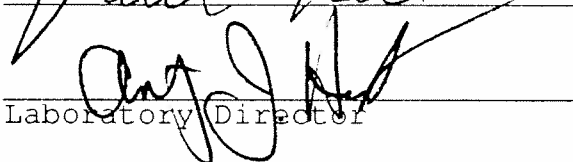
PROJECT #: 1590

LOCATION: SUBMITTED BY CLIENT

RESULTS: SEE ATTACHED

NOTE: SAMPLES WERE RECEIVED IN A CHILLED STATE  
WITH SEALS OF CUSTODY INTACT ON ICE CHESTS  
AND SAMPLES. CHAIN OF CUSTODY WAS SIGNED  
UPON RECEIPT OF SAMPLES.

Reviewed By

  
  
Laboratory Director

LABORATORY NUMBER: 200911  
 CLIENT: GSI ENVIRONMENTAL  
 PROJECT #: 1590  
 LOCATION: MERCURY PHASE II

DATE RECEIVED: 10/26/90  
 DATE ANALYZED: 11/07/90  
 DATE REPORTED: 11/08/90  
 PAGE 2 OF 60

METHOD: EPA 418.1  
 TOTAL PETROLEUM HYDROCARBONS IN SOILS AND WASTES BY IR

| LAB ID | SAMPLE ID         | TPH<br>(mg/Kg) |
|--------|-------------------|----------------|
| 1      | B1-S1 (b) @ 10'   | ND (10)        |
| 2      | B1-S2 (b) @ 15'   | ND (10)        |
| 3      | B1-S3 (b) @ 20'   | ND (10)        |
| 4      | B1-S4 (b) @ 25'   | ND (10)        |
| 5      | B1-S5 (b) @ 30'   | 35             |
| 6      | B1-S7 (b) @ 40'   | ND (10)        |
| 7      | B1-S8 (b) @ 45'   | ND (10)        |
| 8      | B1-S9 (b) @ 50'   | 17             |
| 9      | B1-S10 (b) @ 50'  | 450            |
| 10     | B4-S1 (b) @ 1'    | 300            |
| 10D    | B4-S1 (b) @ 1'    | 290            |
| 11     | B4-S2 (b) @ 5'    | ND (10)        |
| 12     | B4-S3 (b) @ 10'   | ND (10)        |
| 13     | B2-S1 (b) @ 11.5' | ND (10)        |
| 14     | B2-S2 (b) @ 15'   | ND (10)        |
| 15     | B2-S3 (b) @ 20'   | 23             |
| 16     | B2-S4 (b) @ 25'   | ND (10)        |
| 17     | B2-S5 (b) @ 30'   | ND (10)        |
| 18     | B2-S6 (b) @ 35'   | ND (10)        |
| 19     | B2-S7 (b) @ 40'   | 26             |
| 20     | B2-S8 (b) @ 45'   | 17             |
| 20D    | B2-S8 (b) @ 45'   | 15             |
| 21     | B2-S9 (b) @ 50'   | 21             |
| 22     | B2-S10 (b) @ 55'  | 880            |

ND = NOT DETECTED; METHOD DETECTION LIMIT IN PARENTHESES.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
 Accuracy (Spike % Recovery): 104



LABORATORY NUMBER: 200911  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: MERCURY PHASE II

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/07/90  
DATE REPORTED: 11/08/90  
PAGE 3 OF 60

METHOD: EPA 418.1  
TOTAL PETROLEUM HYDROCARBONS IN SOILS AND WASTES BY IR

| LAB ID | SAMPLE ID                   | TPH<br>(mg/Kg) |
|--------|-----------------------------|----------------|
| 25     | B3-S8 (b) @ 45'             | 23             |
| 26     | B3-S9 (b) @ 50'             | ND (10)        |
| 27     | B3-S10 (b) @ 55'            | ND (10)        |
| 28     | B3-S1 (b) @ 11'             | ND (10)        |
| 29     | B3-S2 (b) @ 15'             | ND (10)        |
| 30     | B3-S3 (b) @ 20'             | ND (10)        |
| 31     | B3-S4 (b) @ 25'             | ND (10)        |
| 32     | B3-S5 (b) @ 30'             | ND (10)        |
| 32D    | B3-S5 (b) @ 30'             | ND (10)        |
| 33     | B3-S6 (b) @ 35'             | 13             |
| 34     | B3-S7 (b) @ 40'             | ND (10)        |
| LB     | LAB BLANK                   | ND (10) OK     |
| MS     | METHOD SPIKE (40)           | 41.8 OK        |
| MSD    | METHOD SPIKE DUPLICATE (40) | 41.0 OK        |
| QA     | SD91009-1 (1,140)           | 1,120 OK       |
| QA     | SD91009-2 (1,530)           | 1,440 OK       |

ND = NOT DETECTED; METHOD DETECTION LIMIT IN PARENTHESES.

QA/QC DATA SUMMARY:

|                                    |     |
|------------------------------------|-----|
| Precision (Relative % Difference): | 2   |
| Accuracy (Spike % Recovery):       | 104 |

LABORATORY NUMBER: 200911  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: MERCURY PHASE II

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/07/90  
DATE REPORTED: 11/08/90  
PAGE 4 OF 60

METHOD: EPA 418.1  
TOTAL PETROLEUM HYDROCARBONS IN AQUEOUS SOLUTIONS BY IR  
EXTRACTION: EPA 3510 SEPERATORY FUNNEL

| LAB ID | SAMPLE ID                   | TPH<br>(mg/L) |
|--------|-----------------------------|---------------|
| 24     | FIELD EQUIP BLANK           | ND (1.0)      |
| LB     | LAB BLANK                   | ND (1.0) OK   |
| MS     | METHOD SPIKE (40)           | 36.7 OK       |
| MSD    | METHOD SPIKE DUPLICATE (40) | 36.9 OK       |

ND = NOT DETECTED; METHOD DETECTION LIMIT IN PARENTHESES.

QA/QC DATA SUMMARY:

|                                    |    |
|------------------------------------|----|
| Precision (Relative % Difference): | 1  |
| Accuracy (Spike % Recovery):       | 92 |



LABORATORY NUMBER: 200911-1  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S1(B)@10.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
PAGE 5 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100  
-----



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-2  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S2 (B) @15.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
PAGE 6 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-3  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S3(B)@20.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
PAGE 7 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100

LABORATORY NUMBER: 200911-4  
 CLIENT: GSI ENVIRONMENTAL  
 PROJECT #: 1590  
 LOCATION: SUBMITTED BY CLIENT  
 SAMPLE ID: B1-S4(B)@25.0'

DATE RECEIVED: 10/26/90  
 DATE ANALYZED: 11/02/90  
 DATE REPORTED: 11/08/90  
 PAGE 8 OF 60

METHOD: EPA 8010  
 VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
 Accuracy (Spike % Recovery): 100



LABORATORY NUMBER: 200911-5  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S5(B)@30.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
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METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100  
-----



LABORATORY NUMBER: 200911-6  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S7(B)@40.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
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METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100  
-----

LABORATORY NUMBER: 200911-7  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S8(B)@45.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
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METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-8  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S9(B)@50.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
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METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

-----  
Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100  
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Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-9  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S10(B)@50.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/03/90  
DATE REPORTED: 11/08/90  
PAGE 13 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT | PQL |
|---------------------------|--------|-----|
| --ug/Kg--                 |        |     |
| Chloromethane             | ND     | 10  |
| Bromomethane              | ND     | 10  |
| Vinyl chloride            | ND     | 10  |
| Chloroethane              | ND     | 10  |
| Methylene chloride        | ND     | 5   |
| Trichlorofluoromethane    | ND     | 5   |
| 1,1-Dichloroethene        | ND     | 5   |
| 1,1-Dichloroethane        | ND     | 5   |
| cis-1,2-Dichloroethene    | ND     | 5   |
| trans-1,2-Dichloroethene  | ND     | 5   |
| Chloroform                | ND     | 5   |
| Freon 113                 | ND     | 5   |
| 1,2-Dichloroethane        | ND     | 5   |
| 1,1,1-Trichloroethane     | ND     | 5   |
| Carbon tetrachloride      | ND     | 5   |
| Bromodichloromethane      | ND     | 5   |
| 1,2-Dichloropropane       | ND     | 5   |
| cis-1,3-Dichloropropene   | ND     | 5   |
| Trichloroethylene         | ND     | 5   |
| 1,1,2-Trichloroethane     | ND     | 5   |
| trans-1,3-Dichloropropene | ND     | 5   |
| Dibromochloromethane      | ND     | 5   |
| 2-Chloroethylvinyl ether  | ND     | 10  |
| Bromoform                 | ND     | 5   |
| Tetrachloroethene         | ND     | 5   |
| 1,1,2,2-Tetrachloroethane | ND     | 5   |
| Chlorobenzene             | ND     | 5   |
| 1,3-Dichlorobenzene       | ND     | 5   |
| 1,2-Dichlorobenzene       | ND     | 5   |
| 1,4-Dichlorobenzene       | ND     | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100



LABORATORY NUMBER: 200911-10  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B4-S1(B)@1.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
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METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT | PQL |
|---------------------------|--------|-----|
| --ug/Kg--                 |        |     |
| Chloromethane             | ND     | 10  |
| Bromomethane              | ND     | 10  |
| Vinyl chloride            | ND     | 10  |
| Chloroethane              | ND     | 10  |
| Methylene chloride        | ND     | 5   |
| Trichlorofluoromethane    | ND     | 5   |
| 1,1-Dichloroethene        | ND     | 5   |
| 1,1-Dichloroethane        | ND     | 5   |
| cis-1,2-Dichloroethene    | ND     | 5   |
| trans-1,2-Dichloroethene  | ND     | 5   |
| Chloroform                | ND     | 5   |
| Freon 113                 | ND     | 5   |
| 1,2-Dichloroethane        | ND     | 5   |
| 1,1,1-Trichloroethane     | ND     | 5   |
| Carbon tetrachloride      | ND     | 5   |
| Bromodichloromethane      | ND     | 5   |
| 1,2-Dichloropropane       | ND     | 5   |
| cis-1,3-Dichloropropene   | ND     | 5   |
| Trichloroethylene         | ND     | 5   |
| 1,1,2-Trichloroethane     | ND     | 5   |
| trans-1,3-Dichloropropene | ND     | 5   |
| Dibromochloromethane      | ND     | 5   |
| 2-Chloroethylvinyl ether  | ND     | 10  |
| Bromoform                 | ND     | 5   |
| Tetrachloroethene         | ND     | 5   |
| 1,1,2,2-Tetrachloroethane | ND     | 5   |
| Chlorobenzene             | ND     | 5   |
| 1,3-Dichlorobenzene       | ND     | 5   |
| 1,2-Dichlorobenzene       | ND     | 5   |
| 1,4-Dichlorobenzene       | ND     | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100



LABORATORY NUMBER: 200911-11  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B4-S2 (B) @5.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/03/90  
DATE REPORTED: 11/08/90  
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METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100  
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Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-12  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B4-S3(B)@10.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/03/90  
DATE REPORTED: 11/08/90  
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METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100  
-----



LABORATORY NUMBER: 200911-13  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B2-S1(B)@11.5'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/03/90  
DATE REPORTED: 11/08/90  
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METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100  
-----



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-14  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B2-S2(B)@15.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/05/90  
DATE REPORTED: 11/08/90  
PAGE 18 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100  
-----



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-15  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B2-S3(B)@20.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/05/90  
DATE REPORTED: 11/08/90  
PAGE 19 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100  
-----



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-16  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B2-S4(B)@25.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/05/90  
DATE REPORTED: 11/08/90  
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METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

-----  
Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100  
-----



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-17  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B2-S5(B)@30.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/05/90  
DATE REPORTED: 11/08/90  
PAGE 21 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT | PQL |
|---------------------------|--------|-----|
| --ug/Kg--                 |        |     |
| Chloromethane             | ND     | 10  |
| Bromomethane              | ND     | 10  |
| Vinyl chloride            | ND     | 10  |
| Chloroethane              | ND     | 10  |
| Methylene chloride        | ND     | 5   |
| Trichlorofluoromethane    | ND     | 5   |
| 1,1-Dichloroethene        | ND     | 5   |
| 1,1-Dichloroethane        | ND     | 5   |
| cis-1,2-Dichloroethene    | ND     | 5   |
| trans-1,2-Dichloroethene  | ND     | 5   |
| Chloroform                | ND     | 5   |
| Freon 113                 | ND     | 5   |
| 1,2-Dichloroethane        | ND     | 5   |
| 1,1,1-Trichloroethane     | ND     | 5   |
| Carbon tetrachloride      | ND     | 5   |
| Bromodichloromethane      | ND     | 5   |
| 1,2-Dichloropropane       | ND     | 5   |
| cis-1,3-Dichloropropene   | ND     | 5   |
| Trichloroethylene         | ND     | 5   |
| 1,1,2-Trichloroethane     | ND     | 5   |
| trans-1,3-Dichloropropene | ND     | 5   |
| Dibromochloromethane      | ND     | 5   |
| 2-Chloroethylvinyl ether  | ND     | 10  |
| Bromoform                 | ND     | 5   |
| Tetrachloroethene         | ND     | 5   |
| 1,1,2,2-Tetrachloroethane | ND     | 5   |
| Chlorobenzene             | ND     | 5   |
| 1,3-Dichlorobenzene       | ND     | 5   |
| 1,2-Dichlorobenzene       | ND     | 5   |
| 1,4-Dichlorobenzene       | ND     | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-18  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B2-S6(B)@35.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/05/90  
DATE REPORTED: 11/08/90  
PAGE 22 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT | PQL |
|---------------------------|--------|-----|
| --ug/Kg--                 |        |     |
| Chloromethane             | ND     | 10  |
| Bromomethane              | ND     | 10  |
| Vinyl chloride            | ND     | 10  |
| Chloroethane              | ND     | 10  |
| Methylene chloride        | ND     | 5   |
| Trichlorofluoromethane    | ND     | 5   |
| 1,1-Dichloroethene        | ND     | 5   |
| 1,1-Dichloroethane        | ND     | 5   |
| cis-1,2-Dichloroethene    | ND     | 5   |
| trans-1,2-Dichloroethene  | ND     | 5   |
| Chloroform                | ND     | 5   |
| Freon 113                 | ND     | 5   |
| 1,2-Dichloroethane        | ND     | 5   |
| 1,1,1-Trichloroethane     | ND     | 5   |
| Carbon tetrachloride      | ND     | 5   |
| Bromodichloromethane      | ND     | 5   |
| 1,2-Dichloropropane       | ND     | 5   |
| cis-1,3-Dichloropropene   | ND     | 5   |
| Trichloroethylene         | ND     | 5   |
| 1,1,2-Trichloroethane     | ND     | 5   |
| trans-1,3-Dichloropropene | ND     | 5   |
| Dibromochloromethane      | ND     | 5   |
| 2-Chloroethylvinyl ether  | ND     | 10  |
| Bromoform                 | ND     | 5   |
| Tetrachloroethene         | ND     | 5   |
| 1,1,2,2-Tetrachloroethane | ND     | 5   |
| Chlorobenzene             | ND     | 5   |
| 1,3-Dichlorobenzene       | ND     | 5   |
| 1,2-Dichlorobenzene       | ND     | 5   |
| 1,4-Dichlorobenzene       | ND     | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-19  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B2-S7(B)@40.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
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METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

-----  
Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100  
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Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-20  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B2-S8(B)@45.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 24 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:  
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|                                    |     |
|------------------------------------|-----|
| Precision (Relative % Difference): | 2   |
| Accuracy (Spike % Recovery):       | 100 |

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Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-21  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B2-S9(B)@50.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 25 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT | PQL |
|---------------------------|--------|-----|
| --ug/Kg--                 |        |     |
| Chloromethane             | ND     | 10  |
| Bromomethane              | ND     | 10  |
| Vinyl chloride            | ND     | 10  |
| Chloroethane              | ND     | 10  |
| Methylene chloride        | ND     | 5   |
| Trichlorofluoromethane    | ND     | 5   |
| 1,1-Dichloroethene        | ND     | 5   |
| 1,1-Dichloroethane        | ND     | 5   |
| cis-1,2-Dichloroethene    | ND     | 5   |
| trans-1,2-Dichloroethene  | ND     | 5   |
| Chloroform                | ND     | 5   |
| Freon 113                 | ND     | 5   |
| 1,2-Dichloroethane        | ND     | 5   |
| 1,1,1-Trichloroethane     | ND     | 5   |
| Carbon tetrachloride      | ND     | 5   |
| Bromodichloromethane      | ND     | 5   |
| 1,2-Dichloropropane       | ND     | 5   |
| cis-1,3-Dichloropropene   | ND     | 5   |
| Trichloroethylene         | ND     | 5   |
| 1,1,2-Trichloroethane     | ND     | 5   |
| trans-1,3-Dichloropropene | ND     | 5   |
| Dibromochloromethane      | ND     | 5   |
| 2-Chloroethylvinyl ether  | ND     | 10  |
| Bromoform                 | ND     | 5   |
| Tetrachloroethene         | ND     | 5   |
| 1,1,2,2-Tetrachloroethane | ND     | 5   |
| Chlorobenzene             | ND     | 5   |
| 1,3-Dichlorobenzene       | ND     | 5   |
| 1,2-Dichlorobenzene       | ND     | 5   |
| 1,4-Dichlorobenzene       | ND     | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 3  
Accuracy (Spike % Recovery): 78



LABORATORY NUMBER: 200911-22  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B2-S10(B)@55.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 26 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | 6         | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

-----  
Precision (Relative % Difference): 3  
Accuracy (Spike % Recovery): 78  
-----



LABORATORY NUMBER: 200911-25  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S8(B)@45.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
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METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT | PQL |
|---------------------------|--------|-----|
| --ug/Kg--                 |        |     |
| Chloromethane             | ND     | 10  |
| Bromomethane              | ND     | 10  |
| Vinyl chloride            | ND     | 10  |
| Chloroethane              | ND     | 10  |
| Methylene chloride        | ND     | 5   |
| Trichlorofluoromethane    | ND     | 5   |
| 1,1-Dichloroethene        | ND     | 5   |
| 1,1-Dichloroethane        | ND     | 5   |
| cis-1,2-Dichloroethene    | ND     | 5   |
| trans-1,2-Dichloroethene  | ND     | 5   |
| Chloroform                | ND     | 5   |
| Freon 113                 | ND     | 5   |
| 1,2-Dichloroethane        | ND     | 5   |
| 1,1,1-Trichloroethane     | ND     | 5   |
| Carbon tetrachloride      | ND     | 5   |
| Bromodichloromethane      | ND     | 5   |
| 1,2-Dichloropropane       | ND     | 5   |
| cis-1,3-Dichloropropene   | ND     | 5   |
| Trichloroethylene         | ND     | 5   |
| 1,1,2-Trichloroethane     | ND     | 5   |
| trans-1,3-Dichloropropene | ND     | 5   |
| Dibromochloromethane      | ND     | 5   |
| 2-Chloroethylvinyl ether  | ND     | 10  |
| Bromoform                 | ND     | 5   |
| Tetrachloroethene         | ND     | 5   |
| 1,1,2,2-Tetrachloroethane | ND     | 5   |
| Chlorobenzene             | ND     | 5   |
| 1,3-Dichlorobenzene       | ND     | 5   |
| 1,2-Dichlorobenzene       | ND     | 5   |
| 1,4-Dichlorobenzene       | ND     | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 3  
Accuracy (Spike % Recovery): 78



LABORATORY NUMBER: 200911-26  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S9(B)@50.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 28 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

Precision (Relative % Difference): 3  
Accuracy (Spike % Recovery): 78  
-----



LABORATORY NUMBER: 200911-27  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S10(B)@55.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 29 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT | PQL |
|---------------------------|--------|-----|
| --ug/Kg--                 |        |     |
| Chloromethane             | ND     | 10  |
| Bromomethane              | ND     | 10  |
| Vinyl chloride            | ND     | 10  |
| Chloroethane              | ND     | 10  |
| Methylene chloride        | ND     | 5   |
| Trichlorofluoromethane    | ND     | 5   |
| 1,1-Dichloroethene        | ND     | 5   |
| 1,1-Dichloroethane        | ND     | 5   |
| cis-1,2-Dichloroethene    | ND     | 5   |
| trans-1,2-Dichloroethene  | ND     | 5   |
| Chloroform                | ND     | 5   |
| Freon 113                 | ND     | 5   |
| 1,2-Dichloroethane        | ND     | 5   |
| 1,1,1-Trichloroethane     | ND     | 5   |
| Carbon tetrachloride      | ND     | 5   |
| Bromodichloromethane      | ND     | 5   |
| 1,2-Dichloropropane       | ND     | 5   |
| cis-1,3-Dichloropropene   | ND     | 5   |
| Trichloroethylene         | ND     | 5   |
| 1,1,2-Trichloroethane     | ND     | 5   |
| trans-1,3-Dichloropropene | ND     | 5   |
| Dibromochloromethane      | ND     | 5   |
| 2-Chloroethylvinyl ether  | ND     | 10  |
| Bromoform                 | ND     | 5   |
| Tetrachloroethene         | ND     | 5   |
| 1,1,2,2-Tetrachloroethane | ND     | 5   |
| Chlorobenzene             | ND     | 5   |
| 1,3-Dichlorobenzene       | ND     | 5   |
| 1,2-Dichlorobenzene       | ND     | 5   |
| 1,4-Dichlorobenzene       | ND     | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 3  
Accuracy (Spike % Recovery): 78



LABORATORY NUMBER: 200911-28  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S1(B)@11.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/05/90  
DATE REPORTED: 11/08/90  
PAGE 30 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 94  
-----



LABORATORY NUMBER: 200911-29  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S2(B)@15.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
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METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT | PQL |
|---------------------------|--------|-----|
| --ug/Kg--                 |        |     |
| Chloromethane             | ND     | 10  |
| Bromomethane              | ND     | 10  |
| Vinyl chloride            | ND     | 10  |
| Chloroethane              | ND     | 10  |
| Methylene chloride        | ND     | 5   |
| Trichlorofluoromethane    | ND     | 5   |
| 1,1-Dichloroethene        | ND     | 5   |
| 1,1-Dichloroethane        | ND     | 5   |
| cis-1,2-Dichloroethene    | ND     | 5   |
| trans-1,2-Dichloroethene  | ND     | 5   |
| Chloroform                | ND     | 5   |
| Freon 113                 | ND     | 5   |
| 1,2-Dichloroethane        | ND     | 5   |
| 1,1,1-Trichloroethane     | ND     | 5   |
| Carbon tetrachloride      | ND     | 5   |
| Bromodichloromethane      | ND     | 5   |
| 1,2-Dichloropropane       | ND     | 5   |
| cis-1,3-Dichloropropene   | ND     | 5   |
| Trichloroethylene         | ND     | 5   |
| 1,1,2-Trichloroethane     | ND     | 5   |
| trans-1,3-Dichloropropene | ND     | 5   |
| Dibromochloromethane      | ND     | 5   |
| 2-Chloroethylvinyl ether  | ND     | 10  |
| Bromoform                 | ND     | 5   |
| Tetrachloroethene         | ND     | 5   |
| 1,1,2,2-Tetrachloroethane | ND     | 5   |
| Chlorobenzene             | ND     | 5   |
| 1,3-Dichlorobenzene       | ND     | 5   |
| 1,2-Dichlorobenzene       | ND     | 5   |
| 1,4-Dichlorobenzene       | ND     | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 94



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-30  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S3(B)@20.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 32 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 94  
-----



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-31  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S4(B)@25.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 33 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

-----  
Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 94  
-----



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-32  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S5(B)@30.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 34 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

-----  
Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 94  
-----



LABORATORY NUMBER: 200911-33  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S6(B)@35.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 35 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT | PQL |
|---------------------------|--------|-----|
| --ug/Kg--                 |        |     |
| Chloromethane             | ND     | 10  |
| Bromomethane              | ND     | 10  |
| Vinyl chloride            | ND     | 10  |
| Chloroethane              | ND     | 10  |
| Methylene chloride        | ND     | 5   |
| Trichlorofluoromethane    | ND     | 5   |
| 1,1-Dichloroethene        | ND     | 5   |
| 1,1-Dichloroethane        | ND     | 5   |
| cis-1,2-Dichloroethene    | ND     | 5   |
| trans-1,2-Dichloroethene  | ND     | 5   |
| Chloroform                | ND     | 5   |
| Freon 113                 | ND     | 5   |
| 1,2-Dichloroethane        | ND     | 5   |
| 1,1,1-Trichloroethane     | ND     | 5   |
| Carbon tetrachloride      | ND     | 5   |
| Bromodichloromethane      | ND     | 5   |
| 1,2-Dichloropropane       | ND     | 5   |
| cis-1,3-Dichloropropene   | ND     | 5   |
| Trichloroethylene         | ND     | 5   |
| 1,1,2-Trichloroethane     | ND     | 5   |
| trans-1,3-Dichloropropene | ND     | 5   |
| Dibromochloromethane      | ND     | 5   |
| 2-Chloroethylvinyl ether  | ND     | 10  |
| Bromoform                 | ND     | 5   |
| Tetrachloroethene         | ND     | 5   |
| 1,1,2,2-Tetrachloroethane | ND     | 5   |
| Chlorobenzene             | ND     | 5   |
| 1,3-Dichlorobenzene       | ND     | 5   |
| 1,2-Dichlorobenzene       | ND     | 5   |
| 1,4-Dichlorobenzene       | ND     | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 94



LABORATORY NUMBER: 200911-34  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S7(B)@40.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 36 OF 60

METHOD: EPA 8010  
VOLATILE HALOCARBONS IN SOIL AND WASTES

| COMPOUND                  | RESULT    | PQL |
|---------------------------|-----------|-----|
| -----                     |           |     |
|                           | --ug/Kg-- |     |
| Chloromethane             | ND        | 10  |
| Bromomethane              | ND        | 10  |
| Vinyl chloride            | ND        | 10  |
| Chloroethane              | ND        | 10  |
| Methylene chloride        | ND        | 5   |
| Trichlorofluoromethane    | ND        | 5   |
| 1,1-Dichloroethene        | ND        | 5   |
| 1,1-Dichloroethane        | ND        | 5   |
| cis-1,2-Dichloroethene    | ND        | 5   |
| trans-1,2-Dichloroethene  | ND        | 5   |
| Chloroform                | ND        | 5   |
| Freon 113                 | ND        | 5   |
| 1,2-Dichloroethane        | ND        | 5   |
| 1,1,1-Trichloroethane     | ND        | 5   |
| Carbon tetrachloride      | ND        | 5   |
| Bromodichloromethane      | ND        | 5   |
| 1,2-Dichloropropane       | ND        | 5   |
| cis-1,3-Dichloropropene   | ND        | 5   |
| Trichloroethylene         | ND        | 5   |
| 1,1,2-Trichloroethane     | ND        | 5   |
| trans-1,3-Dichloropropene | ND        | 5   |
| Dibromochloromethane      | ND        | 5   |
| 2-Chloroethylvinyl ether  | ND        | 10  |
| Bromoform                 | ND        | 5   |
| Tetrachloroethene         | ND        | 5   |
| 1,1,2,2-Tetrachloroethane | ND        | 5   |
| Chlorobenzene             | ND        | 5   |
| 1,3-Dichlorobenzene       | ND        | 5   |
| 1,2-Dichlorobenzene       | ND        | 5   |
| 1,4-Dichlorobenzene       | ND        | 5   |

ND = NOT DETECTED.

PQL = PRACTICAL QUANTITATION LIMIT.

-----  
QA/QC DATA SUMMARY:

-----  
Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 94  
-----

LABORATORY NUMBER: 200911-1  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S1(B)@10.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
PAGE 37 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| --ug/Kg--           |        |                    |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 98



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-2  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S2(B)@15.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
PAGE 38 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
|                     |        | --ug/Kg--          |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

QA/QC DATA SUMMARY:

|                                    |    |
|------------------------------------|----|
| Precision (Relative % Difference): | 2  |
| Accuracy (Spike % Recovery):       | 98 |

LABORATORY NUMBER: 200911-3  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S3(B)@20.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
PAGE 39 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| -----               |        |                    |
|                     |        | --ug/Kg--          |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 98



Curtis &amp; Tompkins, Ltd

LABORATORY NUMBER: 200911-4  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S4(B)@25.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
PAGE 40 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT    | DETECTION<br>LIMIT |
|---------------------|-----------|--------------------|
| -----               |           |                    |
|                     | --ug/Kg-- |                    |
| Benzene             | ND        | 5                  |
| Toluene             | ND        | 5                  |
| Ethyl benzene       | ND        | 5                  |
| Total xylenes       | ND        | 5                  |
| Chlorobenzene       | ND        | 5                  |
| 1,4-Dichlorobenzene | ND        | 5                  |
| 1,3-Dichlorobenzene | ND        | 5                  |
| 1,2-Dichlorobenzene | ND        | 5                  |

ND = NOT DETECTED.

-----  
QA/QC DATA SUMMARY:

-----  
Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 98  
-----



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-5  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S5(B)@30.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
PAGE 41 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| --ug/Kg--           |        |                    |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 98



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-6  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S7(B)@40.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
PAGE 42 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| -----               |        |                    |
| --ug/Kg--           |        |                    |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

-----  
QA/QC DATA SUMMARY:  
-----

|                                    |    |
|------------------------------------|----|
| Precision (Relative % Difference): | 2  |
| Accuracy (Spike % Recovery):       | 98 |

-----



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-7  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S8(B)@45.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
PAGE 43 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT    | DETECTION<br>LIMIT |
|---------------------|-----------|--------------------|
| -----               |           |                    |
|                     | --ug/Kg-- |                    |
| Benzene             | ND        | 5                  |
| Toluene             | ND        | 5                  |
| Ethyl benzene       | ND        | 5                  |
| Total xylenes       | ND        | 5                  |
| Chlorobenzene       | ND        | 5                  |
| 1,4-Dichlorobenzene | ND        | 5                  |
| 1,3-Dichlorobenzene | ND        | 5                  |
| 1,2-Dichlorobenzene | ND        | 5                  |

ND = NOT DETECTED.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 98



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-8  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S9(B)@50.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
PAGE 44 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| --ug/Kg--           |        |                    |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 98



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-9  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B1-S10(B)@50.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/03/90  
DATE REPORTED: 11/08/90  
PAGE 45 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| -----               |        |                    |
| --ug/Kg--           |        |                    |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

-----  
QA/QC DATA SUMMARY:  
-----

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 98  
-----

LABORATORY NUMBER: 200911-10  
 CLIENT: GSI ENVIRONMENTAL  
 PROJECT #: 1590  
 LOCATION: SUBMITTED BY CLIENT  
 SAMPLE ID: B4-S1(B)@1.0'

DATE RECEIVED: 10/26/90  
 DATE ANALYZED: 11/06/90  
 DATE REPORTED: 11/08/90  
 PAGE 46 OF 60

METHOD: EPA 8020  
 VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
 EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| --ug/Kg--           |        |                    |
| Benzene             | 8      | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
 Accuracy (Spike % Recovery): 98



LABORATORY NUMBER: 200911-11  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B4-S2(B)@5.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/03/90  
DATE REPORTED: 11/08/90  
PAGE 47 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT    | DETECTION<br>LIMIT |
|---------------------|-----------|--------------------|
| -----               |           |                    |
|                     | --ug/Kg-- |                    |
| Benzene             | ND        | 5                  |
| Toluene             | ND        | 5                  |
| Ethyl benzene       | ND        | 5                  |
| Total xylenes       | ND        | 5                  |
| Chlorobenzene       | ND        | 5                  |
| 1,4-Dichlorobenzene | ND        | 5                  |
| 1,3-Dichlorobenzene | ND        | 5                  |
| 1,2-Dichlorobenzene | ND        | 5                  |

ND = NOT DETECTED.

-----  
QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 98  
-----

LABORATORY NUMBER: 200911-12  
 CLIENT: GSI ENVIRONMENTAL  
 PROJECT #: 1590  
 LOCATION: SUBMITTED BY CLIENT  
 SAMPLE ID: B4-S3(B)@10.0'

DATE RECEIVED: 10/26/90  
 DATE ANALYZED: 11/03/90  
 DATE REPORTED: 11/08/90  
 PAGE 48 OF 60

METHOD: EPA 8020  
 VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
 EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| --ug/Kg--           |        |                    |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
 Accuracy (Spike % Recovery): 98



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-25  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S8(B)@45.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 49 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| --ug/Kg--           |        |                    |
| Benzene             | 21     | 5                  |
| Toluene             | 14     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 98



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-26  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S9(B)@50.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 50 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| -----               |        |                    |
|                     |        | --ug/Kg--          |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

-----  
QA/QC DATA SUMMARY:  
-----

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 98  
-----



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-27  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S10(B)@55.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 51 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT    | DETECTION<br>LIMIT |
|---------------------|-----------|--------------------|
| -----               |           |                    |
|                     | --ug/Kg-- |                    |
| Benzene             | ND        | 5                  |
| Toluene             | ND        | 5                  |
| Ethyl benzene       | ND        | 5                  |
| Total xylenes       | ND        | 5                  |
| Chlorobenzene       | ND        | 5                  |
| 1,4-Dichlorobenzene | ND        | 5                  |
| 1,3-Dichlorobenzene | ND        | 5                  |
| 1,2-Dichlorobenzene | ND        | 5                  |

ND = NOT DETECTED.

-----  
QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 98  
-----



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-28  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S1(B)@11.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/05/90  
DATE REPORTED: 11/08/90  
PAGE 52 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| -----               |        |                    |
| --ug/Kg--           |        |                    |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

-----  
QA/QC DATA SUMMARY:  
-----

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100  
-----



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-29  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S2(B)@15.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 53 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| --ug/Kg--           |        |                    |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

QA/QC DATA SUMMARY:

|                                    |     |
|------------------------------------|-----|
| Precision (Relative % Difference): | 2   |
| Accuracy (Spike % Recovery):       | 100 |



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-30  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S3(B)@20.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 54 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| --ug/Kg--           |        |                    |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-31  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S4(B)@25.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 55 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| --ug/Kg--           |        |                    |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-32  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S5(B)@30.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 56 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| --ug/Kg--           |        |                    |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

QA/QC DATA SUMMARY:

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-33  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S6(B)@35.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 57 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
| -----               |        |                    |
| --ug/Kg--           |        |                    |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

-----  
QA/QC DATA SUMMARY:  
-----

Precision (Relative % Difference): 2  
Accuracy (Spike % Recovery): 100  
-----



Curtis & Tompkins, Ltd.

LABORATORY NUMBER: 200911-34  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
LOCATION: SUBMITTED BY CLIENT  
SAMPLE ID: B3-S7(B)@40.0'

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/06/90  
DATE REPORTED: 11/08/90  
PAGE 58 OF 60

METHOD: EPA 8020  
VOLATILE AROMATIC HYDROCARBONS IN SOILS & WASTES  
EXTRACTION: EPA 5030 PURGE & TRAP

| COMPOUND            | RESULT | DETECTION<br>LIMIT |
|---------------------|--------|--------------------|
|                     |        | --ug/Kg--          |
| Benzene             | ND     | 5                  |
| Toluene             | ND     | 5                  |
| Ethyl benzene       | ND     | 5                  |
| Total xylenes       | ND     | 5                  |
| Chlorobenzene       | ND     | 5                  |
| 1,4-Dichlorobenzene | ND     | 5                  |
| 1,3-Dichlorobenzene | ND     | 5                  |
| 1,2-Dichlorobenzene | ND     | 5                  |

ND = NOT DETECTED.

QA/QC DATA SUMMARY:

|                                    |     |
|------------------------------------|-----|
| Precision (Relative % Difference): | 2   |
| Accuracy (Spike % Recovery):       | 100 |



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-23  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
SAMPLE ID: TRIP BLANK

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/05/90  
DATE REPORTED: 11/08/90  
PAGE 59 OF 60

METHOD: EPA 624  
VOLATILE ORGANICS IN WATER

| COMPOUND                  | RESULT   | PQL |
|---------------------------|----------|-----|
| -----                     |          |     |
|                           | --ug/L-- |     |
| Chloromethane             | ND       | 10  |
| Bromomethane              | ND       | 10  |
| Vinyl Chloride            | ND       | 10  |
| Chloroethane              | ND       | 10  |
| Methylene chloride        | ND       | 5   |
| Acetone                   | ND       | 10  |
| Carbon disulfide          | ND       | 5   |
| Trichlorofluoromethane    | ND       | 5   |
| 1,1-Dichloroethene        | ND       | 5   |
| 1,1-Dichloroethane        | ND       | 5   |
| cis-1,2-Dichloroethene    | ND       | 5   |
| trans-1,2-Dichloroethene  | ND       | 5   |
| Chloroform                | ND       | 5   |
| Freon 113                 | ND       | 5   |
| 1,2-Dichloroethane        | ND       | 5   |
| 2-Butanone                | ND       | 10  |
| 1,1,1-Trichloroethane     | ND       | 5   |
| Carbon tetrachloride      | ND       | 5   |
| Vinyl acetate             | ND       | 10  |
| Bromodichloromethane      | ND       | 5   |
| 1,2-Dichloropropane       | ND       | 5   |
| cis-1,3-Dichloropropene   | ND       | 5   |
| Trichloroethylene         | ND       | 5   |
| Dibromochloromethane      | ND       | 5   |
| 1,1,2-Trichloroethane     | ND       | 5   |
| Benzene                   | ND       | 5   |
| trans-1,3-Dichloropropene | ND       | 5   |
| 2-Chloroethylvinyl ether  | ND       | 10  |
| Bromoform                 | ND       | 5   |
| 2-Hexanone                | ND       | 10  |
| 4-Methyl-2-Pentanone      | ND       | 10  |
| 1,1,2,2-Tetrachloroethane | ND       | 5   |
| Tetrachloroethene         | ND       | 5   |
| Toluene                   | ND       | 5   |
| Chlorobenzene             | ND       | 5   |
| Ethyl benzene             | ND       | 5   |
| Styrene                   | ND       | 5   |
| Total xylenes             | ND       | 5   |

QA/QC SUMMARY: SURROGATE RECOVERIES PQL = PRACTICAL QUANTITATION LIMIT

|                       |      |
|-----------------------|------|
| 1,2-Dichloroethane-d4 | 99%  |
| Toluene-d8            | 108% |
| Bromofluorobenzene    | 97%  |



Curtis &amp; Tompkins, Ltd.

LABORATORY NUMBER: 200911-24  
CLIENT: GSI ENVIRONMENTAL  
PROJECT #: 1590  
SAMPLE ID: FIELD EQUIP BLANK

DATE RECEIVED: 10/26/90  
DATE ANALYZED: 11/02/90  
DATE REPORTED: 11/08/90  
PAGE 60 OF 60

METHOD: EPA 624  
VOLATILE ORGANICS IN WATER

| COMPOUND                  | RESULT | PQL |
|---------------------------|--------|-----|
| --ug/L--                  |        |     |
| Chloromethane             | ND     | 10  |
| Bromomethane              | ND     | 10  |
| Vinyl Chloride            | ND     | 10  |
| Chloroethane              | ND     | 10  |
| Methylene chloride        | ND     | 5   |
| Acetone                   | ND     | 10  |
| Carbon disulfide          | ND     | 5   |
| Trichlorofluoromethane    | ND     | 5   |
| 1,1-Dichloroethene        | ND     | 5   |
| 1,1-Dichloroethane        | ND     | 5   |
| cis-1,2-Dichloroethene    | ND     | 5   |
| trans-1,2-Dichloroethene  | ND     | 5   |
| Chloroform                | ND     | 5   |
| Freon 113                 | ND     | 5   |
| 1,2-Dichloroethane        | ND     | 5   |
| 2-Butanone                | ND     | 10  |
| 1,1,1-Trichloroethane     | ND     | 5   |
| Carbon tetrachloride      | ND     | 5   |
| Vinyl acetate             | ND     | 10  |
| Bromodichloromethane      | ND     | 5   |
| 1,2-Dichloropropane       | ND     | 5   |
| cis-1,3-Dichloropropene   | ND     | 5   |
| Trichloroethylene         | ND     | 5   |
| Dibromochloromethane      | ND     | 5   |
| 1,1,2-Trichloroethane     | ND     | 5   |
| Benzene                   | ND     | 5   |
| trans-1,3-Dichloropropene | ND     | 5   |
| 2-Chloroethylvinyl ether  | ND     | 10  |
| Bromoform                 | ND     | 5   |
| 2-Hexanone                | ND     | 10  |
| 4-Methyl-2-Pentanone      | ND     | 10  |
| 1,1,2,2-Tetrachloroethane | ND     | 5   |
| Tetrachloroethene         | ND     | 5   |
| Toluene                   | ND     | 5   |
| Chlorobenzene             | ND     | 5   |
| Ethyl benzene             | ND     | 5   |
| Styrene                   | ND     | 5   |
| Total xylenes             | ND     | 5   |

QA/QC SUMMARY: SURROGATE RECOVERIES PQL = PRACTICAL QUANTITATION LIMIT

|                       |      |
|-----------------------|------|
| 1,2-Dichloroethane-d4 | 107% |
| Toluene-d8            | 92%  |
| Bromofluorobenzene    | 102% |

# CHAIN OF CUSTODY RECORD - TEST REQUEST

## GSI ENVIRONMENTAL

16541 Gothard Street, Suite 211  
Huntington Beach, California 92647  
Telephone: (714) 843-6866, Telefax: (714) 848-2407



| Observation Well I.O. No.: <u>          </u>                   |          |      |                                       | Project No.: <u>1590</u>               |                                   |                                                            |      |
|----------------------------------------------------------------|----------|------|---------------------------------------|----------------------------------------|-----------------------------------|------------------------------------------------------------|------|
| Samplers (signatures): <u>Bert Palmer &amp; Hayden R. Gonz</u> |          |      |                                       | Project Title: <u>Mercury Phase II</u> |                                   |                                                            |      |
| Sample I.O. No.                                                | Date     | Time | Container Description                 | No. of Containers                      | Required* Analyses                | Comments                                                   |      |
| B159(b)<br>[50']                                               | 10-25-90 | AM   | Brass liner                           | 1                                      | EPA 418.1<br>EPA 8010<br>EPA 8020 | PQL of 5-10 ppb<br>• Sample aliquot from center of sleeve. |      |
| B1510(b)<br>[50']                                              | "        | "    | "                                     | "                                      | "                                 | "                                                          |      |
| B4511(b)<br>[1']                                               | "        | "    | "                                     | "                                      | "                                 | "                                                          |      |
| B452(b)<br>[5']                                                | "        | PM   | "                                     | "                                      | "                                 | "                                                          |      |
| B453(b)<br>[10']                                               | "        | PM   | "                                     | "                                      | "                                 | "                                                          |      |
|                                                                |          |      |                                       |                                        |                                   |                                                            |      |
|                                                                |          |      |                                       |                                        |                                   |                                                            |      |
|                                                                |          |      |                                       |                                        |                                   |                                                            |      |
| Relinquished by <u>[Signature]</u>                             |          |      | Date                                  | Time                                   | Received by <u>[Signature]</u>    | Date                                                       | Time |
|                                                                |          |      | 26/10/90                              | 3:00                                   |                                   | 26/10/90                                                   | 3:00 |
| Relinquished by                                                |          |      | Date                                  | Time                                   | Received for Laboratory by        | Date                                                       | Time |
|                                                                |          |      |                                       |                                        |                                   |                                                            |      |
| Method of Shipment: <u>Container</u>                           |          |      | Airbill (or shipping invoice) Number: |                                        |                                   |                                                            |      |

## CHAIN OF CUSTODY RECORD - TEST REQUEST

## GSI ENVIRONMENTAL

16541 Gothard Street, Suite 211  
Huntington Beach, California 92647  
Telephone: (714) 843-6866, Telefax: (714) 848-2407



| Observation Well I.D. No.: _____                  |               |           |                                       | Project No.: 1590               |                                   |                                                            |
|---------------------------------------------------|---------------|-----------|---------------------------------------|---------------------------------|-----------------------------------|------------------------------------------------------------|
| Samplers (signatures): Bert Palmer & Hayden Bzong |               |           |                                       | Project Title: Mercury Phase II |                                   |                                                            |
| Sample I.D. No.                                   | Date          | Time      | Container Description                 | No. of Containers               | Required Analyses                 | Comments                                                   |
| B1S1 (b) [10']                                    | 10-25-90      | AM        | 1 brass liner                         | 1                               | EPA 418.1<br>EPA 8010<br>EPA 8020 | • PQL of 5-10 ppb<br>• Sample aliquot from center of sieve |
| B1S2 (b) [15']                                    | "             | "         | "                                     | "                               | "                                 | "                                                          |
| B1S3 (b) [20']                                    | "             | "         | "                                     | "                               | "                                 | "                                                          |
| B1S4 (b) [25']                                    | "             | "         | "                                     | "                               | "                                 | "                                                          |
| B1S5 (b) [30']                                    | "             | "         | "                                     | "                               | "                                 | "                                                          |
| B1S6 (b) [35']<br>H.A. 10-25-90                   | "             | "         | "                                     | "                               | "                                 | "                                                          |
| B1S7 (b) [40']                                    | "             | "         | "                                     | "                               | "                                 | "                                                          |
| B1S8 (b) [45']                                    | "             | "         | "                                     | "                               | EPA 418.1<br>EPA 8010<br>EPA 8020 | "                                                          |
| Relinquished by                                   | Date 26/10/90 | Time 2:55 | Received by                           |                                 |                                   |                                                            |
| Relinquished by                                   | Date          | Time      | Received for Laboratory by            |                                 |                                   |                                                            |
| Method of Shipment: Courrier                      |               |           | Airbill (or shipping invoice) Number: |                                 |                                   |                                                            |

## CHAIN OF CUSTODY RECORD - TEST REQUEST

## GSI ENVIRONMENTAL

16541 Gothard Street, Suite 211  
Huntington Beach, California 92647  
Telephone: (714) 843-6866, Telefax: (714) 848-2407



| Observation Well I.D. No.: <u>      </u>                      |             |                      | Project No.: P1590                    |                                |                       |                               |
|---------------------------------------------------------------|-------------|----------------------|---------------------------------------|--------------------------------|-----------------------|-------------------------------|
| Samplers (signatures): <u>Haydar Hazzaz &amp; Bert Palmer</u> |             |                      | Project Title: Mercury Phase II       |                                |                       |                               |
| Sample I.D. No.                                               | Date        | Time                 | Container Description                 | No. of Containers              | Required* Analyses    | Comments                      |
| BZ-S1(b)<br>11.5'                                             | 24-10<br>90 | AM                   | Boss liner                            | 1                              | EPA 418.1<br>EPA 8010 | POL of 5-10 ppb               |
| BZ-S2(b)<br>15'                                               | 24-10<br>90 | AM                   | " "                                   | 1                              | " "                   | Sample aliquot                |
| BZ-S3(b)<br>20'                                               | 24-10<br>90 | AM                   | " "                                   | 1                              | " "                   | from center of sleeve (liner) |
| BZ-S4(b)<br>25'                                               | 24-10<br>90 | AM                   | " "                                   | 1                              | " "                   |                               |
| BZ-S5(b)<br>30'                                               | 24-10<br>90 | AM                   | " "                                   | 1                              | " "                   |                               |
| BZ-S6(b)<br>35'                                               | 24-10<br>90 | AM                   | " "                                   | 1                              | " "                   |                               |
| BZ-S7(b)<br>40'                                               | 24-10<br>90 | AM                   | Boss liner                            | 1                              | EPA 418.1<br>EPA 8010 |                               |
| Relinquished by <u>[Signature]</u>                            |             | Date <u>26/10/90</u> | Time <u>3:00</u>                      | Received by <u>[Signature]</u> | Date <u>10-26-90</u>  | Time <u>3:00</u>              |
| Relinquished by                                               |             | Date                 | Time                                  | Received for Laboratory by     | Date                  | Time                          |
| Method of Shipment: <u>Carrier</u>                            |             |                      | Airbill (or shipping invoice) Number: |                                |                       |                               |

# CHAIN OF CUSTODY RECORD - TEST REQUEST

## GSI ENVIRONMENTAL

16541 Gothard Street, Suite 211  
Huntington Beach, California 92647  
Telephone: (714) 843-6866, Telefax: (714) 848-2407



| Observation Well I.D. No.: <u>          </u>             |          |      | Project No.: P1590                    |                   |                                |                                                            |                  |
|----------------------------------------------------------|----------|------|---------------------------------------|-------------------|--------------------------------|------------------------------------------------------------|------------------|
| Samplers (signatures): Haydar Azzouz and Bert Palmer BSP |          |      | Project Title: Mercury Phase II       |                   |                                |                                                            |                  |
| Sample I.D. No.                                          | Date     | Time | Container Description                 | No. of Containers | Required* Analyses             | Comments                                                   |                  |
| B2-SB(b) 45'                                             | 24-10 90 | AM   | Brass liner                           | 1                 | EPA 418.1<br>EPA 8010          | POL of 5-10ppb sample Alquot from center of sleeve (liner) |                  |
| B2-SB(b) 50'                                             | 24-10 90 | AM   | " "                                   | 1                 | " "                            |                                                            |                  |
| B2-SB(b) 55'                                             | 24-10 90 | AM   | Brass liner                           | 1                 | EPA 418.1<br>EPA 8010          |                                                            |                  |
| Tap blank                                                | -        | -    | 40 mil vial                           | 1                 | EPA 624                        |                                                            |                  |
| field equipment blank                                    | -        | -    | 40 mil Vial<br>1 pint amber bottle    | 1                 | EPA 624<br>EPA 418.1           |                                                            |                  |
|                                                          |          |      |                                       |                   |                                |                                                            |                  |
|                                                          |          |      |                                       |                   |                                |                                                            |                  |
| Relinquished by <u>[Signature]</u>                       |          |      | Date <u>26/6/90</u>                   | Time <u>3:00</u>  | Received by <u>[Signature]</u> | Date <u>10/26/90</u>                                       | Time <u>3:00</u> |
| Relinquished by                                          |          |      | Date                                  | Time              | Received for Laboratory by     | Date                                                       | Time             |
| Method of Shipment: <u>Container</u>                     |          |      | Airbill (or shipping invoice) Number: |                   |                                |                                                            |                  |

# CHAIN OF CUSTODY RECORD - TEST REQUEST

## GSI ENVIRONMENTAL

16541 Gothard Street, Suite 211  
Huntington Beach, California 92647  
Telephone: (714) 843-6866, Telefax: (714) 848-2407



Observation Well I.D. No.:     

Project No.: 1590  
Project Title: MERCURY PHASE II

Samplers (signatures): Bert Palmer & Hayden Brouz

| Sample I.D. No. | Date     | Time | Container Description | No. of Containers | Required* Analyses                | Comments                                                   |
|-----------------|----------|------|-----------------------|-------------------|-----------------------------------|------------------------------------------------------------|
| B3 S1 (b) [11'] | 10-24-90 | PM   | Brass liner           | 1                 | EPA 418.1<br>EPA 8010<br>EPA 8020 | P&L of 5-10 ppb<br>Sample aliquot from<br>center of sleeve |
| B3 S2 (b) [15'] | "        | "    | "                     | "                 | "                                 | "                                                          |
| B3 S3 (b) [20'] | "        | "    | "                     | "                 | "                                 | "                                                          |
| B3 S4 (b) [25'] | "        | "    | "                     | "                 | "                                 | "                                                          |
| B3 S5 (b) [30'] | "        | "    | "                     | "                 | "                                 | "                                                          |
| B3 S6 (b) [35'] | "        | "    | "                     | "                 | "                                 | "                                                          |
| B3 S7 (b) [40'] | "        | "    | "                     | "                 | "                                 | "                                                          |

|                                       |                         |                     |                                                   |                         |                     |
|---------------------------------------|-------------------------|---------------------|---------------------------------------------------|-------------------------|---------------------|
| Relinquished by<br><u>[Signature]</u> | Date<br><u>26/10/90</u> | Time<br><u>3:00</u> | Received by<br><u>[Signature]</u>                 | Date<br><u>10-26-90</u> | Time<br><u>3:00</u> |
| Relinquished by                       | Date                    | Time                | Received for Laboratory by                        | Date                    | Time                |
| Method of Shipment: <u>Container</u>  |                         |                     | Airbill (or shipping invoice) Number: <u>    </u> |                         |                     |

## CHAIN OF CUSTODY RECORD - TEST REQUEST

## GSI ENVIRONMENTAL

16341 Gothard Street, Suite 211  
Huntington Beach, California 92647  
Telephone: (714) 843-6866, Telefax: (714) 848-2407



| Observation Well I.D. No.: <u>                    </u>          |                      |                  |                                                                   | Project No.: <u>1590</u>               |                                   |                                                             |
|-----------------------------------------------------------------|----------------------|------------------|-------------------------------------------------------------------|----------------------------------------|-----------------------------------|-------------------------------------------------------------|
| Samplers (signatures): <u>Best Palmer &amp; Harold Pizzozzi</u> |                      |                  |                                                                   | Project Title: <u>Mercury Phase II</u> |                                   |                                                             |
| Sample I.D. No.                                                 | Date                 | Time             | Container Description                                             | No. of Containers                      | Required* Analyses                | Comments                                                    |
| B358(b)<br>[45']                                                | 10-24-90             | PM               | Brass liner                                                       | 1                                      | EPA 418.1<br>EPA 8010<br>EPA 8020 | - P&L of 5-10 ppb<br>- Sample aliquot from center of sleeve |
| B359(b)<br>[50']                                                | "                    | "                | "                                                                 | "                                      | "                                 | "                                                           |
| B3510(b)<br>[55']                                               | "                    | "                | "                                                                 | "                                      | "                                 | "                                                           |
|                                                                 |                      |                  |                                                                   |                                        |                                   |                                                             |
|                                                                 |                      |                  |                                                                   |                                        |                                   |                                                             |
|                                                                 |                      |                  |                                                                   |                                        |                                   |                                                             |
|                                                                 |                      |                  |                                                                   |                                        |                                   |                                                             |
|                                                                 |                      |                  |                                                                   |                                        |                                   |                                                             |
|                                                                 |                      |                  |                                                                   |                                        |                                   |                                                             |
|                                                                 |                      |                  |                                                                   |                                        |                                   |                                                             |
| Relinquished by <u>[Signature]</u>                              | Date <u>26/10/90</u> | Time <u>3:00</u> | Received by <u>[Signature]</u>                                    | Date <u>10-26-90</u>                   | Time <u>3:00</u>                  |                                                             |
| Relinquished by                                                 | Date                 | Time             | Received for Laboratory by                                        | Date                                   | Time                              |                                                             |
| Method of Shipment: <u>Container</u>                            |                      |                  | Airbill (or shipping invoice) Number: <u>                    </u> |                                        |                                   |                                                             |



Curtis & Tompkins, Ltd., Analytical Laboratories. Since 1878

1250 S. Boyle Ave., Los Angeles, CA 90023, Phone (213) 269-7421, Fax (213) 268-5328

EPA 624/8240 BS/BSD RESULTS WORKSHEET

SOIL SAMPLES: ACCEPTANCE CRITERIA BASED ON CLP 2/88

# SOIL MATRIX ONLY

EXTRACTION DATE: N/A  
RUN DATE: 11/02/90  
SMPL FILE ID:  
MS/BS FILE ID: ^VK125  
MSD/BSD FILE ID: ^VD125

EXTRCTR: N/A  
OPERATER: D. BAREWALD  
SMPL ID:  
JJ FILE ID: 200894, ET AL.

| SURROGATES            | MS/BS | % REC | STATUS | MSD/BSD | % REC | STATUS |
|-----------------------|-------|-------|--------|---------|-------|--------|
| 1,2-Dichloroethane-d4 | 49.40 | 99%   | OK     | 52.95   | 106%  | OK     |
| Toluene-d8            | 48.92 | 98%   | OK     | 48.42   | 97%   | OK     |
| Bromofluorobenzene    | 50.57 | 101%  | OK     | 51.12   | 102%  | OK     |

| SPIKING COMPOUNDS   | MS/BS | % REC | STATUS | MSD/BSD | % REC | STATUS |
|---------------------|-------|-------|--------|---------|-------|--------|
| *1,1-Dichloroethene | 42.82 | 86%   | OK     | 42.57   | 85%   | OK     |
| *Trichloroethene    | 49.57 | 99%   | OK     | 47.94   | 96%   | OK     |
| Benzene             | 52.39 | 105%  | OK     | 51.55   | 103%  | OK     |
| Toluene             | 49.00 | 98%   | OK     | 47.84   | 96%   | OK     |
| + *Chlorobenzene    | 50.07 | 100%  | OK     | 49.08   | 98%   | OK     |
| -----               |       |       |        |         |       |        |
| Average Rec         |       | 97%   |        |         |       |        |

# DUPLICATE PRECISION DATA

|                     | RPD | STATUS | MAX RPD |
|---------------------|-----|--------|---------|
| *1,1-Dichloroethene | 1%  | OK     | 22%     |
| *Trichloroethene    | 3%  | OK     | 24%     |
| Benzene             | 2%  | OK     | 21%     |
| + Toluene           | 2%  | OK     | 21%     |
| *Chlorobenzene      | 2%  | OK     | 21%     |
| -----               |     |        |         |
| Average RPD         | 2%  |        |         |

# ACCEPTABLE RECOVERIES

|                       | LOW | HIGH |
|-----------------------|-----|------|
| 1,2-Dichloroethane-d4 | 70% | 121% |
| Toluene-d8            | 81% | 117% |
| Bromofluorobenzene    | 74% | 121% |
|                       |     |      |
| 1,1-Dichloroethene    | 59% | 172% |
| Trichloroethene       | 62% | 137% |
| Benzene               | 66% | 142% |
| Toluene               | 59% | 139% |
| Chlorobenzene         | 60% | 133% |

\*QA/QC for 8010 Rec = 94% RPD = 2%  
+QA/QC for 8020 Rec = 100% RPD = 2%  
Berkeley Wilmington

Los Angeles

EPA 624/8240 BS/BSD RESULTS WORKSHEET  
WATER SAMPLES: ACCEPTANCE CRITERIA BASED ON CLP 2/88

WATER MATRIX ONLY

|                        |                            |
|------------------------|----------------------------|
| EXTRACTION DATE: N/A   | EXTRCTR: N/A               |
| RUN DATE: 11/02/90     | OPERATER: D.BAREWALD       |
| SMPL FILE ID: .        | SMPL ID:                   |
| MS/BS FILE ID: >VK125  | JJ FILE ID: 200894, ET AL. |
| MSD/BS FILE ID: >VD125 |                            |

| SURROGATES            | MS/BS | % REC | STATUS | MSD/BS | % REC | STATUS |
|-----------------------|-------|-------|--------|--------|-------|--------|
| 1,2-Dichloroethane-d4 | 49.40 | 99%   | OK     | 52.95  | 106%  | OK     |
| Toluene-d8            | 48.92 | 98%   | OK     | 48.42  | 97%   | OK     |
| Bromofluorobenzene    | 50.57 | 101%  | OK     | 51.12  | 102%  | OK     |

| SPIKING COMPOUNDS  | MS/BS | % REC | STATUS | MSD/BS | % REC | STATUS |
|--------------------|-------|-------|--------|--------|-------|--------|
| 1,1-Dichloroethene | 42.82 | 86%   | OK     | 42.57  | 85%   | OK     |
| Trichloroethene    | 49.57 | 99%   | OK     | 47.94  | 96%   | OK     |
| Benzene            | 52.39 | 105%  | OK     | 51.55  | 103%  | OK     |
| Toluene            | 49.00 | 98%   | OK     | 47.84  | 96%   | OK     |
| Chlorobenzene      | 50.07 | 100%  | OK     | 49.08  | 98%   | OK     |

-----

|             |     |
|-------------|-----|
| Average Rec | 97% |
|-------------|-----|

DUPLICATE PRECISION DATA

|                    | RPD | STATUS | MAX RPD |
|--------------------|-----|--------|---------|
| 1,1-Dichloroethene | 1%  | OK     | 14%     |
| Trichloroethene    | 3%  | OK     | 14%     |
| Benzene            | 2%  | OK     | 11%     |
| Toluene            | 2%  | OK     | 13%     |
| Chlorobenzene      | 2%  | OK     | 13%     |

-----

|             |    |
|-------------|----|
| Average RPD | 2% |
|-------------|----|

ACCEPTABLE RECOVERIES

|                       | LOW | HIGH |
|-----------------------|-----|------|
| 1,2-Dichloroethane-d4 | 76% | 114% |
| Toluene-d8            | 88% | 110% |
| Bromofluorobenzene    | 86% | 115% |
| 1,1-Dichloroethene    | 61% | 145% |
| Trichloroethene       | 71% | 120% |
| Benzene               | 76% | 127% |
| Toluene               | 76% | 125% |
| Chlorobenzene         | 75% | 130% |

# QUANT REPORT

Operator ID: DAVE  
Output File: ^UB737::D6  
Data File: >UB737::D6  
Name: BLANK  
Misc: 11/02/90 DJB;IS(7A)

Quant Rev: 6 Quant Time: 901102 20:23  
Injected at: 901102 19:42  
Dilution Factor: 1.00000

ID File: ID\_624::D8  
Title: Daily Calibration via Single Point at 50 ug/L Rev. E  
Last Calibration: 901102 19:44

| Compound                                     | R.T.  | Q ion | Area   | Conc  | Units | q  |
|----------------------------------------------|-------|-------|--------|-------|-------|----|
| 1) *Bromochloromethane                       | 13.56 | 128.0 | 92443  | 50.00 | ug/L  | 93 |
| <del>2) Chloromethane B&amp;L</del>          | 2.96  | 50.0  | 9085   | 3.34  | ug/L  | 92 |
| <del>4) Bromomethane B&amp;L</del>           | 4.70  | 94.0  | 5104   | 3.15  | ug/L  | 98 |
| <del>6) Trichlorofluoromethane B&amp;L</del> | 6.34  | 101.0 | 1152   | 1.40  | ug/L  | 78 |
| <del>8) Freon 113 B&amp;L</del>              | 8.21  | 151.0 | 2176   | .45   | ug/L  | 95 |
| <del>11) Methylene Chloride B&amp;L</del>    | 9.72  | 84.0  | 11339  | 2.36  | ug/L  | 95 |
| <del>14) 2-Butanone B&amp;L</del>            | 12.76 | 43.0  | 19893  | 11.39 | ug/L  | 89 |
| <del>15) Chloroform B&amp;L</del>            | 13.31 | 83.0  | 5856   | .69   | ug/L  | 95 |
| 16) 1,2-Dichloroethane-d4 ✓ 106%             | 14.75 | 65.0  | 247718 | 53.06 | ug/L  | 98 |
| 18) *1,4-Difluorobenzene                     | 15.79 | 114.0 | 695231 | 50.00 | ug/L  | 93 |
| <del>20) 1,1,1-Trichloroethane B&amp;L</del> | 14.23 | 97.0  | 1385   | .18   | ug/L  | 89 |
| <del>22) Benzene B&amp;L</del>               | 15.07 | 78.0  | 6896   | .54   | ug/L  | 96 |
| 32) *Chlorobenzene-d5                        | 22.15 | 117.0 | 572727 | 50.00 | ug/L  | 97 |
| 34) Toluene d-8 ✓ 77%                        | 18.95 | 98.0  | 685966 | 49.67 | ug/L  | 95 |
| <del>35) Toluene B&amp;L</del>               | 19.11 | 92.0  | 5872   | .63   | ug/L  | 97 |
| <del>39) Ethylbenzene B&amp;L</del>          | 22.48 | 106.0 | 7117   | 1.18  | ug/L  | 95 |
| <del>40) Xylene (total) B&amp;L</del>        | 23.62 | 106.0 | 4927   | .71   | ug/L  | 97 |
| <del>41) Styrene B&amp;L</del>               | 23.69 | 104.0 | 4328   | .35   | ug/L  | 94 |
| 43) Bromofluorobenzene ✓ 99%                 | 24.94 | 95.0  | 339568 | 49.39 | ug/L  | 92 |

\* Compound is ISTD

# QUANT REPORT

Operator ID: DAVE  
Output File: ^VS836::D2  
Data File: >VS836::D6  
Name: 50 PPB 624 STD  
Misc: 11/02/90 DJB;VHSL(22E);VA(1A);F(1F);IS(7A)

Quant Rev: 6      Quant Time: 901102 19:44  
                  Injected at: 901102 18:56  
                  Dilution Factor: 1.00000

ID File: ID\_624::D8

Title: Daily Calibration via Single Point at 50 ug/L Rev. E

Last Calibration: 901102 19:44

|     | Compound                   | R.T.  | Q ion | Area   | Conc  | Units | q   |
|-----|----------------------------|-------|-------|--------|-------|-------|-----|
| 1)  | *Bromochloromethane        | 13.55 | 128.0 | 86086  | 50.00 | ug/L  | 92  |
| 2)  | Chloromethane              | 2.97  | 50.0  | 126627 | 50.00 | ug/L  | 92  |
| 3)  | Vinyl Chloride             | 3.36  | 62.0  | 156154 | 50.00 | ug/L  | 97  |
| 4)  | Bromomethane               | 4.70  | 94.0  | 75406  | 50.00 | ug/L  | 99  |
| 5)  | Chloroethane               | 5.19  | 64.0  | 49647  | 50.00 | ug/L  | 97  |
| 6)  | Trichlorofluoromethane     | 6.34  | 101.0 | 38285  | 50.00 | ug/L  | 96  |
| 7)  | Acetone                    | 8.41  | 43.0  | 31000  | 50.00 | ug/L  | 98  |
| 8)  | Freon 113                  | 8.26  | 151.0 | 224918 | 50.00 | ug/L  | 92  |
| 9)  | 1,1-Dichloroethene         | 8.30  | 96.0  | 120268 | 50.00 | ug/L  | 86  |
| 10) | Carbon Disulfide           | 9.17  | 76.0  | 278171 | 50.00 | ug/L  | 99  |
| 11) | Methylene Chloride         | 9.72  | 84.0  | 224155 | 50.00 | ug/L  | 94  |
| 12) | 1,2-Dichloroethene (total) | 10.56 | 96.0  | 191774 | 50.00 | ug/L  | 95  |
| 13) | 1,1-Dichloroethane         | 11.58 | 63.0  | 295028 | 50.00 | ug/L  | 93  |
| 14) | 2-Butanone                 | 12.73 | 43.0  | 81310  | 50.00 | ug/L  | 89  |
| 15) | Chloroform                 | 13.31 | 83.0  | 394650 | 50.00 | ug/L  | 97  |
| 16) | 1,2-Dichloroethane-d4      | 14.76 | 65.0  | 217394 | 50.00 | ug/L  | 98  |
| 17) | 1,2-Dichloroethane         | 14.95 | 62.0  | 286538 | 50.00 | ug/L  | 95  |
| 18) | *1,4-Difluorobenzene       | 15.79 | 114.0 | 639189 | 50.00 | ug/L  | 95  |
| 19) | Vinyl Acetate              | 11.95 | 43.0  | 3690   | 50.00 | ug/L  | 100 |
| 20) | 1,1,1-Trichloroethane      | 14.19 | 97.0  | 349479 | 50.00 | ug/L  | 94  |
| 21) | Carbon Tetrachloride       | 14.76 | 117.0 | 311537 | 50.00 | ug/L  | 98  |
| 22) | Benzene                    | 15.05 | 78.0  | 585152 | 50.00 | ug/L  | 99  |
| 23) | Trichloroethene            | 16.40 | 130.0 | 260021 | 50.00 | ug/L  | 98  |
| 24) | 1,2-Dichloropropane        | 16.67 | 63.0  | 191687 | 50.00 | ug/L  | 94  |
| 25) | Bromodichloromethane       | 17.14 | 83.0  | 346202 | 50.00 | ug/L  | 92  |
| 26) | 2-Chloroethylvinylether    | 18.00 | 63.0  | 17626  | 50.00 | ug/L  | 98  |
| 27) | cis-1,3-Dichloropropene    | 18.37 | 75.0  | 442219 | 50.00 | ug/L  | 95  |
| 28) | trans-1,3-Dichloropropene  | 19.45 | 75.0  | 74114  | 50.00 | ug/L  | 84  |
| 29) | 1,1,2-Trichloroethane      | 19.72 | 97.0  | 181007 | 50.00 | ug/L  | 95  |
| 30) | Dibromochloromethane       | 20.74 | 129.0 | 279630 | 50.00 | ug/L  | 97  |
| 31) | Bromoform                  | 24.17 | 173.0 | 227839 | 50.00 | ug/L  | 95  |
| 32) | *Chlorobenzene-d5          | 22.14 | 117.0 | 523795 | 50.00 | ug/L  | 94  |
| 33) | 4-Methyl-2-Pentanone       | 18.12 | 43.0  | 144771 | 50.00 | ug/L  | 92  |
| 34) | Toluene d-8                | 18.94 | 98.0  | 631511 | 50.00 | ug/L  | 93  |
| 35) | Toluene                    | 19.11 | 92.0  | 427067 | 50.00 | ug/L  | 95  |
| 36) | 2-Hexanone                 | 19.99 | 43.0  | 88611  | 50.00 | ug/L  | 97  |
| 37) | Tetrachloroethene          | 20.50 | 164.0 | 229351 | 50.00 | ug/L  | 96  |
| 38) | Chlorobenzene              | 22.22 | 112.0 | 542169 | 50.00 | ug/L  | 95  |
| 39) | Ethylbenzene               | 22.47 | 106.0 | 274730 | 50.00 | ug/L  | 98  |
| 40) | Xylene (total)             | 23.59 | 106.0 | 315917 | 50.00 | ug/L  | 98  |
| 41) | Styrene                    | 23.67 | 104.0 | 567844 | 50.00 | ug/L  | 95  |
| 42) | 1,1,2,2-Tetrachloroethane  | 24.72 | 83.0  | 230458 | 50.00 | ug/L  | 93  |
| 43) | Bromofluorobenzene         | 24.92 | 95.0  | 314366 | 50.00 | ug/L  | 88  |

Continuing Calibration Check  
HSL Compounds

Case No: \_\_\_\_\_ Calibration Date: 11/02/90  
Contractor: Curtis & Tompkins Time: 18:56  
Contract No: \_\_\_\_\_ Laboratory ID: >US836  
Instrument ID: HP 5995 Initial Calibration Date: 11/01/90

Minimum RF for SPCC is 0.300 Maximum % Diff for CCC is 25.0%

| Compound                   | RF      | RF      | %Diff | CCC SPCC |
|----------------------------|---------|---------|-------|----------|
| Chloromethane              | 1.33595 | 1.47094 | 10.10 | **       |
| Vinyl Chloride             | 1.66735 | 1.81393 | 8.79  | *        |
| Bromomethane               | .80718  | .87594  | 8.52  |          |
| Chloroethane               | .49830  | .57671  | 15.74 |          |
| Trichlorofluoromethane     | .34112  | .44473  | 30.37 |          |
| Acetone                    | .35202  | .36011  | 2.30  |          |
| Freon 113                  | 2.37367 | 2.61271 | 10.07 |          |
| 1,1-Dichloroethene         | 1.15717 | 1.39707 | 20.73 | *        |
| Carbon Disulfide           | 3.05641 | 3.23132 | 5.72  |          |
| Methylene Chloride         | 2.14277 | 2.60385 | 21.52 |          |
| 1,2-Dichloroethene (total) | 2.01941 | 2.22770 | 10.31 |          |
| 1,1-Dichloroethane         | 2.36376 | 3.42713 | 44.99 | **       |
| 2-Butanone                 | 1.03571 | .94452  | 8.80  |          |
| Chloroform                 | 4.18079 | 4.58437 | 9.65  | *        |
| 1,2-Dichloroethane-d4      | 2.44905 | 2.52531 | 3.11  |          |
| 1,2-Dichloroethane         | 3.04702 | 3.32851 | 9.24  |          |
| Vinyl Acetate              | .00979  | .00577  | 41.03 |          |
| 1,1,1-Trichloroethane      | .51143  | .54675  | 6.91  |          |
| Carbon Tetrachloride       | .44428  | .48739  | 9.70  |          |
| Benzene                    | .88447  | .91546  | 3.50  |          |
| Trichloroethene            | .40014  | .40680  | 1.66  |          |
| 1,2-Dichloropropane        | .28677  | .29989  | 4.58  | *        |
| Bromodichloromethane       | .50600  | .54163  | 7.04  |          |
| 2-Chloroethylvinylether    | .03317  | .02758  | 16.87 |          |
| cis-1,3-Dichloropropene    | .67464  | .69184  | 2.55  |          |
| trans-1,3-Dichloropropene  | .12298  | .11595  | 5.72  |          |
| 1,1,2-Trichloroethane      | .27129  | .28318  | 4.38  |          |
| Dibromochloromethane       | .41133  | .43748  | 6.36  |          |
| Bromoform                  | .35240  | .35645  | 1.15  | **       |
| 4-Methyl-2-Pentanone       | .30463  | .27639  | 9.27  |          |
| Toluene d-8                | 1.17724 | 1.20565 | 2.41  |          |
| Toluene                    | .76099  | .81533  | 7.14  | *        |

RF - Response Factor from daily standard file at 50.00 ug/L

RF - Average Response Factor from Initial Calibration Form VI

%Diff - % Difference from original average or curve

CCC - Calibration Check Compounds (\*) SPCC - System Performance Check Compounds (\*\*)

Continuing Calibration Check  
HSL Compounds

Case No: \_\_\_\_\_ Calibration Date: 11/02/90  
Contractor: Curtis & Tompkins \_\_\_\_\_ Time: 18:56  
Contract No: \_\_\_\_\_ Laboratory ID: >US836  
Instrument ID: HP 5995 \_\_\_\_\_ Initial Calibration Date: 11/01/90

Minimum RF for SPCC is 0.300 Maximum % Diff for CCC is 25.0%

| Compound                  | RF     | RF      | %Diff | CCC | SPCC |
|---------------------------|--------|---------|-------|-----|------|
| 2-Hexanone                | .18422 | .16917  | 8.17  |     |      |
| Tetrachloroethene         | .40501 | .43786  | 8.11  |     |      |
| Chlorobenzene             | .94558 | 1.03508 | 9.46  | **  |      |
| Ethylbenzene              | .47858 | .52450  | 9.59  | *   |      |
| Xylene (total)            | .53147 | .60313  | 13.48 |     |      |
| Styrene                   | .97329 | 1.08410 | 11.38 |     |      |
| 1,1,2,2-Tetrachloroethane | .39689 | .43998  | 10.86 | **  |      |
| Bromofluorobenzene        | .60489 | .60017  | .78   |     |      |

RF - Response Factor from daily standard file at 50.00 ug/L

RF - Average Response Factor from Initial Calibration Form VI

%Diff - % Difference from original average or curve

CCC - Calibration Check Compounds (\*) SPCC - System Performance Check Compounds (\*\*)

Initial Calibration Data  
HSL Compounds

Case No: \_\_\_\_\_ Instrument ID: HP 5995  
Contractor: Curtis & Tompkins Calibration Date: 11/01/90  
Contract No: \_\_\_\_\_

Raw Data in  
Job # 200894  
Ebasco

Minimum RF for SPCC is 0.300 Maximum % RSD for CCC is 30.0%

Laboratory ID: >VSC75 >VSC76 >VSC77 >VSC78 >VSC79

| Compound                   | RF<br>20.00 | RF<br>50.00 | RF<br>100.00 | RF<br>150.00 | RF<br>200.00 | RF      | % RSD  | CORR1   | CCC | SPCC |
|----------------------------|-------------|-------------|--------------|--------------|--------------|---------|--------|---------|-----|------|
| Chloromethane              | 1.42121     | 1.48326     | 1.28867      | 1.17960      | 1.30700      | 1.33595 | 8.895  | .995101 | **  | ✓    |
| Vinyl Chloride             | 1.61782     | 1.85488     | 1.64539      | 1.60827      | 1.61038      | 1.66735 | 6.350  | .999150 | *   | ✓    |
| Bromomethane               | .81541      | .90043      | .78984       | .76064       | .76956       | .80718  | 6.966  | .998968 |     |      |
| Chloroethane               | .51233      | .56319      | .48396       | .46006       | .47197       | .49830  | 8.255  | .998409 |     |      |
| Trichlorofluoromethane     | .33914      | .38556      | .32821       | .28280       | .36989       | .34112  | 11.703 | .977771 |     |      |
| Acetone                    | .57004      | .28346      | .39166       | .28248       | .23246       | .35202  | 38.359 | .934748 |     |      |
| Freon 113                  | 2.56202     | 2.67510     | 2.28931      | 1.97485      | 2.36706      | 2.37367 | 11.393 | .987319 |     |      |
| 1,1-Dichloroethene         | 1.25124     | 1.26241     | 1.11980      | .99382       | 1.15855      | 1.15717 | 9.467  | .991172 | *   | ✓    |
| Carbon Disulfide           | 3.03829     | 3.24381     | 3.03875      | 2.86475      | 3.09643      | 3.05641 | 4.453  | .997686 |     |      |
| Methylene Chloride         | 1.42370     | 2.58280     | 2.28407      | 2.20250      | 2.22078      | 2.14277 | 20.077 | .997087 |     |      |
| 1,2-Dichloroethene (total) | 2.06425     | 2.28986     | 2.00591      | 1.85275      | 1.88426      | 2.01941 | 8.626  | .998075 |     |      |
| 1,1-Dichloroethane         | 2.58019     | 2.83013     | 2.07177      | 1.75912      | 2.57757      | 2.36376 | 18.452 | .954692 | **  | ✓    |
| 2-Butanone                 | 1.44574     | 1.16544     | .97358       | .88818       | .70561       | 1.03571 | 27.290 | .975918 |     |      |
| Chloroform                 | 4.39163     | 4.76109     | 4.08077      | 3.81916      | 3.85132      | 4.18079 | 9.497  | .998282 | *   | ✓    |
| 1,2-Dichloroethane-d4      | 2.83873     | 2.76197     | 2.43763      | 2.19367      | 2.01325      | 2.44905 | 14.509 | .994200 |     |      |
| 1,2-Dichloroethane         | 3.17203     | 3.48328     | 3.05819      | 2.84365      | 2.67793      | 3.04702 | 10.164 | .996374 |     |      |
| Vinyl Acetate              | -           | .00271      | .01354       | .02164       | .00127       | .00979  | 98.180 | .201377 |     |      |
| 1,1,1-Trichloroethane      | .50904      | .54629      | .50955       | .50159       | .49065       | .51143  | 4.094  | .999541 |     |      |
| Carbon Tetrachloride       | .43689      | .48762      | .44414       | .42716       | .42560       | .44428  | 5.711  | .999229 |     |      |
| Benzene                    | .91154      | .94147      | .86894       | .85264       | .84777       | .88447  | 4.586  | .999735 |     |      |
| Trichloroethene            | .40801      | .43273      | .37853       | .36641       | .41503       | .40014  | 6.788  | .994061 |     |      |
| 1,2-Dichloropropane        | .28559      | .30571      | .28269       | .28311       | .27675       | .28677  | 3.861  | .999610 | *   | ✓    |
| Bromodichloromethane       | .50179      | .53654      | .50073       | .50669       | .48427       | .50600  | 3.764  | .999174 |     |      |
| 2-Chloroethylvinylether    | .02477      | .03337      | .03701       | .03779       | .03292       | .03317  | 15.568 | .991762 |     |      |
| cis-1,3-Dichloropropene    | .62023      | .71694      | .69447       | .69524       | .64631       | .67464  | 5.915  | .997684 |     |      |
| trans-1,3-Dichloropropene  | .09103      | .12411      | .13209       | .13929       | .12836       | .12298  | 15.212 | .997223 |     |      |
| 1,1,2-Trichloroethane      | .28179      | .28964      | .27456       | .27212       | .23831       | .27129  | 7.247  | .993168 |     |      |
| Dibromochloromethane       | .40747      | .44353      | .41262       | .41062       | .38243       | .41133  | 5.283  | .997876 |     |      |
| Bromoform                  | .35147      | .37296      | .37170       | .36124       | .30463       | .35240  | 7.971  | .987327 | **  | ✓    |
| 4-Methyl-2-Pentanone       | .29932      | .31412      | .32098       | .32647       | .26223       | .30463  | 8.465  | .981150 |     |      |

RF - Response Factor (Subscript is amount in ug/L)

RF - Average Response Factor

%RSD - Percent Relative Standard Deviation

CORRn - Coefficient of Correlation (nth degree)

CCC - Calibration Check Compounds (\*) SPCC - System Performance Check Compounds (\*\*)

Initial Calibration Data  
HSL Compounds

Case No: \_\_\_\_\_ Instrument ID: HP 5995  
Contractor: Curtis & Tompkins \_\_\_\_\_ Calibration Date: 11/01/90  
Contract No: \_\_\_\_\_

Minimum RF for SPCC is 0.300 Maximum % RSD for CCC is 30.0%

| Compound                  | Laboratory ID: >VSC75 >VSC76 >VSC77 >VSC78 >VSC79 |         |         |         |         | RF      | % RSD  | CORR1   | CCC  | SPCC |
|---------------------------|---------------------------------------------------|---------|---------|---------|---------|---------|--------|---------|------|------|
|                           | RF                                                | RF      | RF      | RF      | RF      |         |        |         |      |      |
|                           | 20.00                                             | 50.00   | 100.00  | 150.00  | 200.00  |         |        |         |      |      |
| Toluene d-8               | 1.29482                                           | 1.23526 | 1.14515 | 1.10072 | 1.11026 | 1.17724 | 7.178  | .999731 |      |      |
| Toluene                   | .79570                                            | .82889  | .73719  | .72738  | .71579  | .76099  | 6.422  | .999472 | * ✓  |      |
| 2-Hexanone                | .18586                                            | .19061  | .19357  | .19623  | .15485  | .18422  | 9.156  | .977802 |      |      |
| Tetrachloroethene         | .42651                                            | .44383  | .38705  | .38384  | .38383  | .40501  | 6.971  | .999367 |      |      |
| Chlorobenzene             | .97245                                            | 1.02646 | .91837  | .90852  | .90210  | .94558  | 5.613  | .999542 | ** ✓ |      |
| Ethylbenzene              | .52245                                            | .52873  | .46388  | .44775  | .43011  | .47858  | 9.318  | .998812 | * ✓  |      |
| Xylene (total)            | .58574                                            | .60056  | .51702  | .48987  | .46416  | .53147  | 11.206 | .997702 |      |      |
| Styrene                   | 1.05881                                           | 1.08658 | .95038  | .91797  | .85272  | .97329  | 10.050 | .997274 |      |      |
| 1,1,2,2-Tetrachloroethane | .42654                                            | .42503  | .42980  | .43080  | .27229  | .39689  | 17.560 | .909953 | ** ✓ |      |
| Bromofluorobenzene        | .69502                                            | .64589  | .58478  | .54906  | .54971  | .60489  | 10.576 | .999462 |      |      |

RF - Response Factor (Subscript is amount in ug/L)

RF - Average Response Factor

%RSD - Percent Relative Standard Deviation

CORRn - Coefficient of Correlation (nth degree)

CCC - Calibration Check Compounds (\*) SPCC - System Performance Check Compounds (\*\*)

## GC/MS PERFORMANCE STANDARD

Bromofluorobenzene (BFB)

| m/z | Ion Abundance<br>Criteria          | % Relative Abundance |                     | Status |
|-----|------------------------------------|----------------------|---------------------|--------|
|     |                                    | Base<br>Peak         | Appropriate<br>Peak |        |
| 50  | 15-40% of mass 95                  | 18.11                | 18.11               | Ok     |
| 75  | 30-60% of mass 95                  | 47.79                | 47.79               | Ok     |
| 95  | Base peak, 100% relative abundance | 100.00               | 100.00              | Ok     |
| 96  | 5-9% of mass 95                    | 7.06                 | 7.06                | Ok     |
| 173 | Less than 2% of mass 174           | 0.00                 | 0.00                | Ok     |
| 174 | Greater than 50% of mass 95        | 93.69                | 93.69               | Ok     |
| 175 | 5-9% of mass 174                   | 6.82                 | 7.28                | Ok     |
| 176 | 95-101% of mass 174                | 90.64                | 96.75               | Ok     |
| 177 | 5-9% of mass 176                   | 5.95                 | 6.56                | Ok     |

Injection Date: 10/31/90

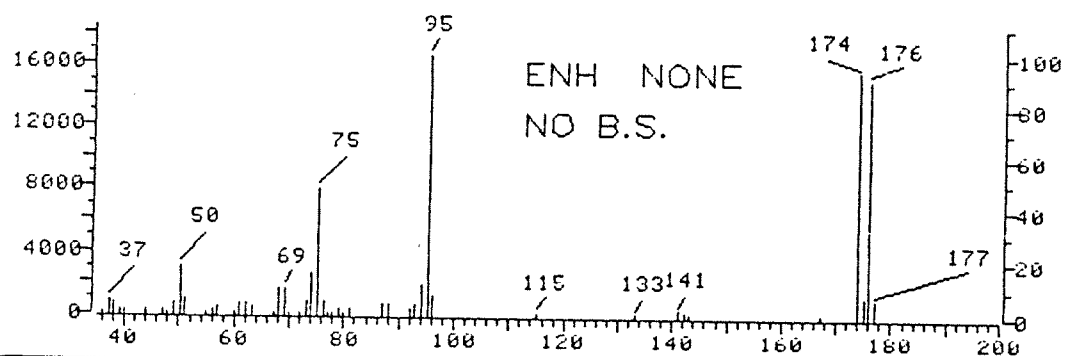
Injection Time: 20:56

Data File: &gt;BF085

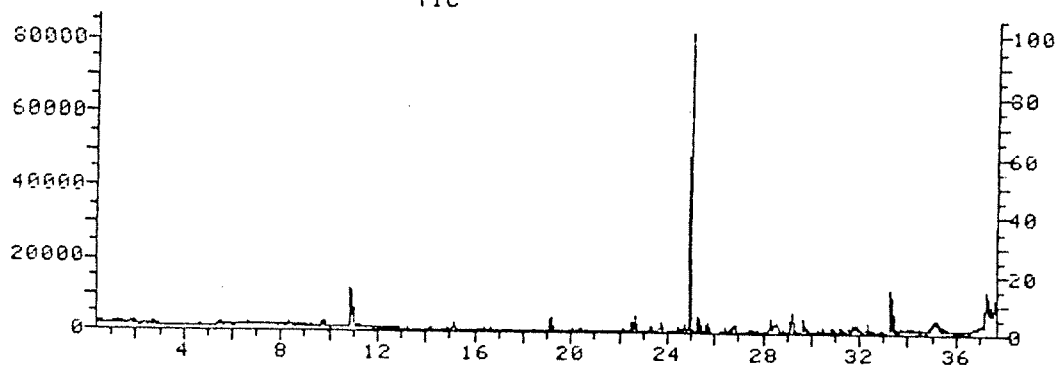
Scan: 1261

File >BF085 BFB  
Epk Ab 16648

10/31/90 DJB;BFB(04/20/89)

Scan 1261  
24.90 min.File >BF085 35.0-260.0 amu. BFB  
TIC

10/31/90 DJB;BFB(04/20/



## GC/MS PERFORMANCE STANDARD

Bromofluorobenzene (BFB)

| m/z | Ion Abundance<br>Criteria          | % Relative Abundance<br>Base<br>Peak | Appropriate<br>Peak | Status |
|-----|------------------------------------|--------------------------------------|---------------------|--------|
| 50  | 15-40% of mass 95                  | 20.67                                | 20.67               | Ok     |
| 75  | 30-60% of mass 95                  | 53.98                                | 53.98               | Ok     |
| 95  | Base peak, 100% relative abundance | 100.00                               | 100.00              | Ok     |
| 96  | 5-9% of mass 95                    | 6.52                                 | 6.52                | Ok     |
| 173 | Less than 2% of mass 174           | 0.00                                 | 0.00                | Ok     |
| 174 | Greater than 50% of mass 95        | 70.34                                | 70.34               | Ok     |
| 175 | 5-9% of mass 174                   | 4.80                                 | 6.82                | Ok     |
| 176 | 95-101% of mass 174                | 68.71                                | 97.68               | Ok     |
| 177 | 5-9% of mass 176                   | 4.31                                 | 6.27                | Ok     |

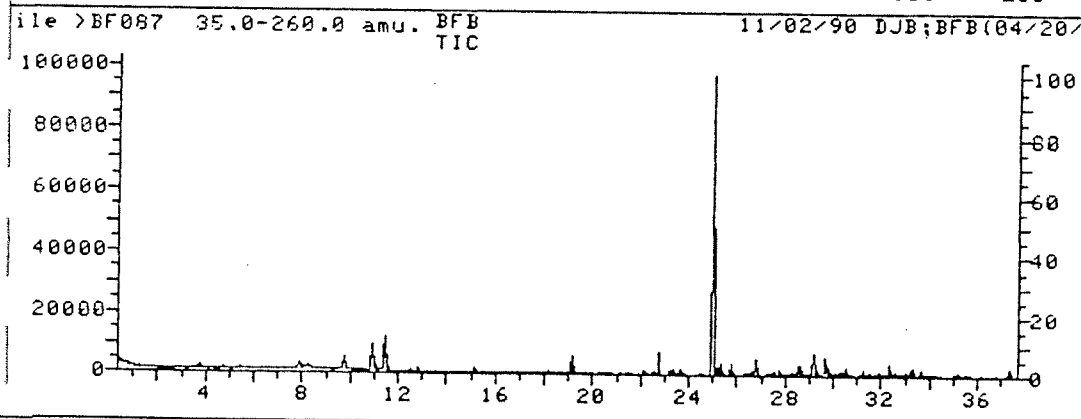
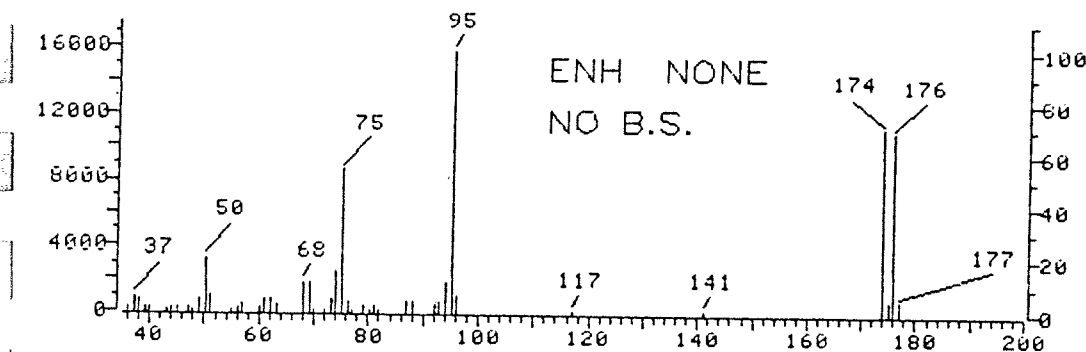
Injection Date: 11/02/90

Injection Time: 18:06

Data File: &gt;BF087

Scan: 1263

File >BF087 BFB 11/02/90 DJB;BFB(04/20/89) Scan 1263  
Apk Ab 15853 24.94 min.



## GC/MS PERFORMANCE STANDARD

Bromofluorobenzene (BFB)

| m/z | Ion Abundance<br>Criteria          | % Relative Abundance |                     | Status |
|-----|------------------------------------|----------------------|---------------------|--------|
|     |                                    | Base<br>Peak         | Appropriate<br>Peak |        |
| 50  | 15-40% of mass 95                  | 18.75                | 18.75               | Ok     |
| 75  | 30-60% of mass 95                  | 51.73                | 51.73               | Ok     |
| 95  | Base peak, 100% relative abundance | 100.00               | 100.00              | Ok     |
| 96  | 5-9% of mass 95                    | 6.56                 | 6.56                | Ok     |
| 173 | Less than 2% of mass 174           | 0.00                 | 0.00                | Ok     |
| 174 | Greater than 50% of mass 95        | 88.17                | 88.17               | Ok     |
| 175 | 5-9% of mass 174                   | 6.06                 | 6.87                | Ok     |
| 176 | 95-101% of mass 174                | 88.13                | 99.95               | Ok     |
| 177 | 5-9% of mass 176                   | 5.95                 | 6.75                | Ok     |

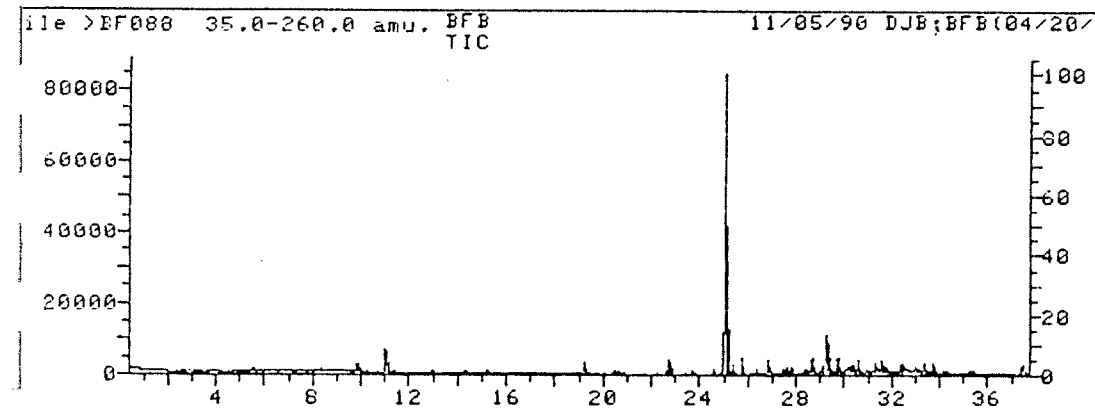
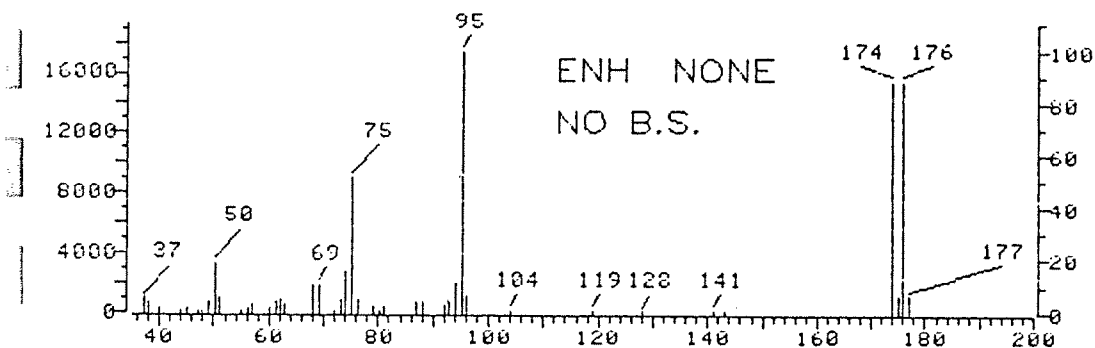
Injection Date: 11/05/90

Injection Time: 16:29

Data File: &gt;BF088

Scan: 1263

File >BF088 BFB 11/05/90 DJB;BFB(04/20/89) Scan 1263  
pk Ab 17432 25.00 min.



# QUANT REPORT

Operator ID: DAVE  
 Output File: ^VB738::D6  
 Data File: >VB738::D6  
 Name: BLANK  
 Date: 11/05/90 DJB;IS(7A)

Quant Rev: 6 Quant Time: 901105 18:53  
 Injected at: 901105 18:12  
 Dilution Factor: 1.00000

ID File: ID\_624::D8  
 Title: Daily Calibration via Single Point at 50 ug/L Rev. E  
 Last Calibration: 901105 18:10

| Compound                                 | R.T.  | Q ion | Area   | Conc  | Units | q  |
|------------------------------------------|-------|-------|--------|-------|-------|----|
| 1) *Bromochloromethane                   | 13.62 | 128.0 | 67608  | 50.00 | ug/L  | 88 |
| <del>2) Chloromethane BQL</del>          | 2.91  | 50.0  | 6288   | 3.06  | ug/L  | 98 |
| <del>4) Bromomethane BQL</del>           | 4.74  | 94.0  | 3667   | 2.67  | ug/L  | 99 |
| <del>11) Methylene Chloride BQL</del>    | 9.74  | 84.0  | 9441   | 2.54  | ug/L  | 88 |
| <del>14) 2-Butanone BQL</del>            | 12.90 | 43.0  | 13177  | 8.73  | ug/L  | 89 |
| <del>15) Chloroform BQL</del>            | 13.39 | 83.0  | 3617   | .68   | ug/L  | 98 |
| 16) 1,2-Dichloroethane-d4 ✓ 110%         | 14.83 | 65.0  | 217505 | 54.95 | ug/L  | 97 |
| 18) *1,4-Difluorobenzene                 | 15.87 | 114.0 | 576077 | 50.00 | ug/L  | 95 |
| <del>20) 1,1,1-Trichloroethane BQL</del> | 14.25 | 97.0  | 1802   | .27   | ug/L  | 87 |
| <del>22) Benzene BQL</del>               | 15.13 | 78.0  | 8343   | .79   | ug/L  | 98 |
| 32) *Chlorobenzene-d5                    | 22.21 | 117.0 | 480694 | 50.00 | ug/L  | 98 |
| 34) Toluene d-8 ✓ 99%                    | 19.01 | 98.0  | 560974 | 49.46 | ug/L  | 89 |
| <del>35) Toluene BQL</del>               | 19.17 | 92.0  | 6059   | .77   | ug/L  | 95 |
| <del>39) Ethylbenzene BQL</del>          | 22.55 | 106.0 | 5503   | 1.10  | ug/L  | 98 |
| <del>40) Xylene (total) BQL</del>        | 23.66 | 106.0 | 3294   | .56   | ug/L  | 95 |
| <del>41) Styrene BQL</del>               | 23.74 | 104.0 | 3003   | .29   | ug/L  | 90 |
| 43) Bromofluorobenzene ✓ 100%            | 24.97 | 95.0  | 293608 | 50.03 | ug/L  | 99 |

\* Compound is ISTD

# QUANT REPORT

Operator ID: DAVE Quant Rev: 6 Quant Time: 901105 18:10  
Output File: ^US837::D2 Injected at: 901105 17:26  
Data File: >US837::D6 Dilution Factor: 1.00000  
Name: 50 PPB 624 STD  
Misc: 11/05/90 DJB;VHSL(22E);VA(1A);F(1F);IS(7A)

ID File: ID\_624::D8  
Title: Daily Calibration via Single Point at 50 ug/L Rev. E  
Last Calibration: 901105 18:10

|     | Compound                   | R.T.  | Q ion | Area   | Conc  | Units | q   |
|-----|----------------------------|-------|-------|--------|-------|-------|-----|
| 1)  | *Bromochloromethane        | 13.63 | 128.0 | 67978  | 50.00 | ug/L  | 90  |
| 2)  | Chloromethane              | 2.97  | 50.0  | 103360 | 50.00 | ug/L  | 93  |
| 3)  | Vinyl Chloride             | 3.38  | 62.0  | 132996 | 50.00 | ug/L  | 95  |
| 4)  | Bromomethane               | 4.72  | 94.0  | 69094  | 50.00 | ug/L  | 97  |
| 5)  | Chloroethane               | 5.21  | 64.0  | 46151  | 50.00 | ug/L  | 96  |
| 6)  | Trichlorofluoromethane     | 6.38  | 101.0 | 24538  | 50.00 | ug/L  | 94  |
| 7)  | Acetone                    | 8.43  | 43.0  | 26927  | 50.00 | ug/L  | 98  |
| 8)  | Freon 113                  | 8.30  | 151.0 | 209854 | 50.00 | ug/L  | 95  |
| 9)  | 1,1-Dichloroethene         | 8.32  | 96.0  | 85082  | 50.00 | ug/L  | 87  |
| 10) | Carbon Disulfide           | 9.22  | 76.0  | 230841 | 50.00 | ug/L  | 99  |
| 11) | Methylene Chloride         | 9.74  | 84.0  | 186775 | 50.00 | ug/L  | 91  |
| 12) | 1,2-Dichloroethene (total) | 10.60 | 96.0  | 149509 | 50.00 | ug/L  | 94  |
| 13) | 1,1-Dichloroethane         | 11.64 | 63.0  | 106241 | 50.00 | ug/L  | 92  |
| 14) | 2-Butanone                 | 12.85 | 43.0  | 75923  | 50.00 | ug/L  | 82  |
| 15) | Chloroform                 | 13.39 | 83.0  | 268599 | 50.00 | ug/L  | 97  |
| 16) | 1,2-Dichloroethane-d4      | 14.82 | 65.0  | 199006 | 50.00 | ug/L  | 99  |
| 17) | 1,2-Dichloroethane         | 15.01 | 62.0  | 264810 | 50.00 | ug/L  | 96  |
| 18) | *1,4-Difluorobenzene       | 15.85 | 114.0 | 559882 | 50.00 | ug/L  | 94  |
| 19) | Vinyl Acetate              | 11.99 | 43.0  | 3344   | 50.00 | ug/L  | 100 |
| 20) | 1,1,1-Trichloroethane      | 14.25 | 97.0  | 326931 | 50.00 | ug/L  | 94  |
| 21) | Carbon Tetrachloride       | 14.82 | 117.0 | 284562 | 50.00 | ug/L  | 97  |
| 22) | Benzene                    | 15.11 | 78.0  | 515480 | 50.00 | ug/L  | 99  |
| 23) | Trichloroethene            | 16.46 | 130.0 | 230214 | 50.00 | ug/L  | 97  |
| 24) | 1,2-Dichloropropane        | 16.73 | 63.0  | 162801 | 50.00 | ug/L  | 92  |
| 25) | Bromodichloromethane       | 17.20 | 83.0  | 312664 | 50.00 | ug/L  | 91  |
| 26) | 2-Chloroethylvinylether    | 18.08 | 63.0  | 12801  | 50.00 | ug/L  | 92  |
| 27) | cis-1,3-Dichloropropene    | 18.45 | 75.0  | 385834 | 50.00 | ug/L  | 96  |
| 28) | trans-1,3-Dichloropropene  | 19.53 | 75.0  | 65073  | 50.00 | ug/L  | 84  |
| 29) | 1,1,2-Trichloroethane      | 19.80 | 97.0  | 164582 | 50.00 | ug/L  | 96  |
| 30) | Dibromochloromethane       | 20.81 | 129.0 | 280636 | 50.00 | ug/L  | 96  |
| 31) | Bromoform                  | 24.23 | 173.0 | 220261 | 50.00 | ug/L  | 97  |
| 32) | *Chlorobenzene-d5          | 22.20 | 117.0 | 462856 | 50.00 | ug/L  | 97  |
| 33) | 4-Methyl-2-Pentanone       | 18.22 | 43.0  | 135048 | 50.00 | ug/L  | 93  |
| 34) | Toluene d-8                | 19.00 | 98.0  | 546096 | 50.00 | ug/L  | 94  |
| 35) | Toluene                    | 19.15 | 92.0  | 377205 | 50.00 | ug/L  | 98  |
| 36) | 2-Hexanone                 | 20.05 | 43.0  | 86559  | 50.00 | ug/L  | 94  |
| 37) | Tetrachloroethene          | 20.56 | 164.0 | 207499 | 50.00 | ug/L  | 96  |
| 38) | Chlorobenzene              | 22.28 | 112.0 | 474635 | 50.00 | ug/L  | 95  |
| 39) | Ethylbenzene               | 22.53 | 106.0 | 239972 | 50.00 | ug/L  | 98  |
| 40) | Xylene (total)             | 23.67 | 106.0 | 280992 | 50.00 | ug/L  | 98  |
| 41) | Styrene                    | 23.72 | 104.0 | 499634 | 50.00 | ug/L  | 95  |
| 42) | 1,1,2,2-Tetrachloroethane  | 24.78 | 83.0  | 215637 | 50.00 | ug/L  | 96  |
| 43) | Bromofluorobenzene         | 24.97 | 95.0  | 282545 | 50.00 | ug/L  | 88  |

Continuing Calibration Check  
HSL Compounds

Case No: \_\_\_\_\_ Calibration Date: 11/05/90  
Contractor: Curtis & Tompkins Time: 17:26  
Contract No: \_\_\_\_\_ Laboratory ID: >US837  
Instrument ID: HP 5995 Initial Calibration Date: 11/01/90

Minimum RF for SPCC is 0.300 Maximum % Diff for CCC is 25.0%

| Compound                   | RF      | RF      | %Diff | CCC | SPCC |
|----------------------------|---------|---------|-------|-----|------|
| Chloromethane              | 1.33595 | 1.52049 | 13.81 | **  | ✓    |
| Vinyl Chloride             | 1.66735 | 1.95646 | 17.34 | *   | ✓    |
| Bromomethane               | .80718  | 1.01642 | 25.92 |     |      |
| Chloroethane               | .49830  | .67891  | 36.24 |     |      |
| Trichlorofluoromethane     | .34112  | .36097  | 5.82  |     |      |
| Acetone                    | .35202  | .39611  | 12.53 |     |      |
| Freon 113                  | 2.37367 | 3.08709 | 30.06 |     |      |
| 1,1-Dichloroethene         | 1.15717 | 1.25161 | 8.16  | *   | ✓    |
| Carbon Disulfide           | 3.05641 | 3.39582 | 11.10 |     |      |
| Methylene Chloride         | 2.14277 | 2.74758 | 28.23 |     |      |
| 1,2-Dichloroethene (total) | 2.01941 | 2.19937 | 8.91  |     |      |
| 1,1-Dichloroethane         | 2.36376 | 1.56287 | 33.88 | **  | ✓    |
| 2-Butanone                 | 1.03571 | 1.11688 | 7.84  |     |      |
| Chloroform                 | 4.18079 | 3.95126 | 5.49  | *   | ✓    |
| 1,2-Dichloroethane-d4      | 2.44905 | 2.92751 | 19.54 |     |      |
| 1,2-Dichloroethane         | 3.04702 | 3.89552 | 27.85 |     |      |
| Vinyl Acetate              | .00979  | .00597  | 38.99 |     |      |
| 1,1,1-Trichloroethane      | .51143  | .58393  | 14.18 |     |      |
| Carbon Tetrachloride       | .44428  | .50825  | 14.40 |     |      |
| Benzene                    | .88447  | .92069  | 4.10  |     |      |
| Trichloroethene            | .40014  | .41118  | 2.76  |     |      |
| 1,2-Dichloropropane        | .28677  | .29078  | 1.40  | *   | ✓    |
| Bromodichloromethane       | .50600  | .55845  | 10.36 |     |      |
| 2-Chloroethylvinylether    | .03317  | .02286  | 31.08 |     |      |
| cis-1,3-Dichloropropene    | .67464  | .68913  | 2.15  |     |      |
| trans-1,3-Dichloropropene  | .12298  | .11623  | 5.49  |     |      |
| 1,1,2-Trichloroethane      | .27129  | .29396  | 8.36  |     |      |
| Dibromochloromethane       | .41133  | .50124  | 21.86 |     |      |
| Bromoform                  | .35240  | .39341  | 11.64 | **  | ✓    |
| 4-Methyl-2-Pentanone       | .30463  | .29177  | 4.22  |     |      |
| Toluene d-8                | 1.17724 | 1.17984 | .22   |     |      |
| Toluene                    | .76099  | .81495  | 7.09  | *   | ✓    |

RF - Response Factor from daily standard file at 50.00 ug/L

RF - Average Response Factor from Initial Calibration Form VI

%Diff - % Difference from original average or curve

CCC - Calibration Check Compounds (\*) SPCC - System Performance Check Compounds (\*\*)

Continuing Calibration Check  
HSL Compounds

Case No: \_\_\_\_\_ Calibration Date: 11/05/90  
Contractor: Curtis & Tompkins Time: 17:26  
Contract No: \_\_\_\_\_ Laboratory ID: >US837  
Instrument ID: HP 5995 Initial Calibration Date: 11/01/90

Minimum  $\overline{RF}$  for SPCC is 0.300 Maximum % Diff for CCC is 25.0%

| Compound                  | $\overline{RF}$ | RF      | %Diff | CCC | SPCC |
|---------------------------|-----------------|---------|-------|-----|------|
| 2-Hexanone                | .18422          | .18701  | 1.51  |     |      |
| Tetrachloroethene         | .40501          | .44830  | 10.69 |     |      |
| Chlorobenzene             | .94558          | 1.02545 | 8.45  | **  | ✓    |
| Ethylbenzene              | .47858          | .51846  | 8.33  | *   | ✓    |
| Xylene (total)            | .53147          | .60708  | 14.23 |     |      |
| Styrene                   | .97329          | 1.07946 | 10.91 |     |      |
| 1,1,2,2-Tetrachloroethane | .39689          | .46588  | 17.38 | **  | ✓    |
| Bromofluorobenzene        | .60489          | .61044  | .92   |     |      |

RF - Response Factor from daily standard file at 50.00 ug/L

$\overline{RF}$  - Average Response Factor from Initial Calibration Form VI

%Diff - % Difference from original average or curve

CCC - Calibration Check Compounds (\*) SPCC - System Performance Check Compounds (\*\*)

Initial Calibration Data  
HSL Compounds

Case No: \_\_\_\_\_ Instrument ID: HP 5995  
Contractor: Curtis & Tompkins Calibration Date: 11/01/90  
Contract No: \_\_\_\_\_

Raw Data in  
Job # 200894  
Ebasco

Minimum RF for SPCC is 0.300 Maximum % RSD for CCC is 30.0%

Laboratory ID: >VSC75 >VSC76 >VSC77 >VSC78 >VSC79

| Compound | RF<br>20.00 | RF<br>50.00 | RF<br>100.00 | RF<br>150.00 | RF<br>200.00 | RF | % RSD | CORR1 | CCC | SPCC |
|----------|-------------|-------------|--------------|--------------|--------------|----|-------|-------|-----|------|
|----------|-------------|-------------|--------------|--------------|--------------|----|-------|-------|-----|------|

|                            |         |         |         |         |         |         |        |         |    |   |
|----------------------------|---------|---------|---------|---------|---------|---------|--------|---------|----|---|
| Chloromethane              | 1.42121 | 1.48326 | 1.28867 | 1.17960 | 1.30700 | 1.33595 | 8.895  | .995101 | ** | ✓ |
| Vinyl Chloride             | 1.61782 | 1.85488 | 1.64539 | 1.60827 | 1.61038 | 1.66735 | 6.350  | .999150 | *  | ✓ |
| Bromomethane               | .81541  | .90043  | .78984  | .76064  | .76956  | .80718  | 6.966  | .998968 |    |   |
| Chloroethane               | .51233  | .56319  | .48396  | .46006  | .47197  | .49830  | 8.255  | .998409 |    |   |
| Trichlorofluoromethane     | .33914  | .38556  | .32821  | .28280  | .36989  | .34112  | 11.703 | .977771 |    |   |
| Acetone                    | .57004  | .28346  | .39166  | .28248  | .23246  | .35202  | 38.359 | .934748 |    |   |
| Freon 113                  | 2.56202 | 2.67510 | 2.28931 | 1.97485 | 2.36706 | 2.37367 | 11.393 | .987319 |    |   |
| 1,1-Dichloroethene         | 1.25124 | 1.26241 | 1.11980 | .99382  | 1.15855 | 1.15717 | 9.467  | .991172 | *  | ✓ |
| Carbon Disulfide           | 3.03829 | 3.24381 | 3.03875 | 2.86475 | 3.09643 | 3.05641 | 4.453  | .997686 |    |   |
| Methylene Chloride         | 1.42370 | 2.58280 | 2.28407 | 2.20250 | 2.22078 | 2.14277 | 20.077 | .997087 |    |   |
| 1,2-Dichloroethene (total) | 2.06425 | 2.28986 | 2.00591 | 1.85275 | 1.88426 | 2.01941 | 8.626  | .998075 |    |   |
| 1,1-Dichloroethane         | 2.58019 | 2.83013 | 2.07177 | 1.75912 | 2.57757 | 2.36376 | 18.452 | .954692 | ** | ✓ |
| 2-Butanone                 | 1.44574 | 1.16544 | .97358  | .88818  | .70561  | 1.03571 | 27.290 | .975918 |    |   |
| Chloroform                 | 4.39163 | 4.76109 | 4.08077 | 3.81916 | 3.85132 | 4.18079 | 9.497  | .998282 | *  | ✓ |
| 1,2-Dichloroethane-d4      | 2.83873 | 2.76197 | 2.43763 | 2.19367 | 2.01325 | 2.44905 | 14.509 | .994200 |    |   |
| 1,2-Dichloroethane         | 3.17203 | 3.48328 | 3.05819 | 2.84365 | 2.67793 | 3.04702 | 10.164 | .996374 |    |   |
| Vinyl Acetate              | -       | .00271  | .01354  | .02164  | .00127  | .00979  | 98.180 | .201377 |    |   |
| 1,1,1-Trichloroethane      | .50904  | .54629  | .50955  | .50159  | .49065  | .51143  | 4.094  | .999541 |    |   |
| Carbon Tetrachloride       | .43689  | .48762  | .44414  | .42716  | .42560  | .44428  | 5.711  | .999229 |    |   |
| Benzene                    | .91154  | .94147  | .86894  | .85264  | .84777  | .88447  | 4.586  | .999735 |    |   |
| Trichloroethene            | .40801  | .43273  | .37853  | .36641  | .41503  | .40014  | 6.788  | .994061 |    |   |
| 1,2-Dichloropropane        | .28559  | .30571  | .28269  | .28311  | .27675  | .28677  | 3.861  | .999610 | *  | ✓ |
| Bromodichloromethane       | .50179  | .53654  | .50073  | .50669  | .48427  | .50600  | 3.764  | .999174 |    |   |
| 2-Chloroethylvinylether    | .02477  | .03337  | .03701  | .03779  | .03292  | .03317  | 15.568 | .991762 |    |   |
| cis-1,3-Dichloropropene    | .62023  | .71694  | .69447  | .69524  | .64631  | .67464  | 5.915  | .997684 |    |   |
| trans-1,3-Dichloropropene  | .09103  | .12411  | .13209  | .13929  | .12836  | .12298  | 15.212 | .997223 |    |   |
| 1,1,2-Trichloroethane      | .28179  | .28964  | .27456  | .27212  | .23831  | .27129  | 7.247  | .993168 |    |   |
| Dibromochloromethane       | .40747  | .44353  | .41262  | .41062  | .38243  | .41133  | 5.283  | .997876 |    |   |
| Bromoform                  | .35147  | .37296  | .37170  | .36124  | .30463  | .35240  | 7.971  | .987327 | ** | ✓ |
| 4-Methyl-2-Pentanone       | .29932  | .31412  | .32098  | .32647  | .26223  | .30463  | 8.465  | .981150 |    |   |

RF - Response Factor (Subscript is amount in ug/L)

RF - Average Response Factor

%RSD - Percent Relative Standard Deviation

CORRn - Coefficient of Correlation (nth degree)

CCC - Calibration Check Compounds (\*) SPCC - System Performance Check Compounds (\*\*)

Initial Calibration Data  
HSL Compounds

Case No: \_\_\_\_\_ Instrument ID: HP 5995  
Contractor: Curtis & Tompkins Calibration Date: 11/01/90  
Contract No: \_\_\_\_\_

Minimum RF for SPCC is 0.300 Maximum % RSD for CCC is 30.0%

| Compound                  | Laboratory ID: >VSC75 >VSC76 >VSC77 >VSC78 >VSC79 |         |         |         |         | RF      | % RSD  | CORR1   | CCC | SPCC |
|---------------------------|---------------------------------------------------|---------|---------|---------|---------|---------|--------|---------|-----|------|
|                           | RF                                                | RF      | RF      | RF      | RF      |         |        |         |     |      |
|                           | 20.00                                             | 50.00   | 100.00  | 150.00  | 200.00  |         |        |         |     |      |
| Toluene d-8               | 1.29482                                           | 1.23526 | 1.14515 | 1.10072 | 1.11026 | 1.17724 | 7.178  | .999731 |     |      |
| Toluene                   | .79570                                            | .82889  | .73719  | .72738  | .71579  | .76099  | 6.422  | .999472 | *   | ✓    |
| 2-Hexanone                | .18586                                            | .19061  | .19357  | .19623  | .15485  | .18422  | 9.156  | .977802 |     |      |
| Tetrachloroethene         | .42651                                            | .44383  | .38705  | .38384  | .38383  | .40501  | 6.971  | .999367 |     |      |
| Chlorobenzene             | .97245                                            | 1.02646 | .91837  | .90852  | .90210  | .94558  | 5.613  | .999542 | **  | ✓    |
| Ethylbenzene              | .52245                                            | .52873  | .46388  | .44775  | .43011  | .47858  | 9.318  | .998812 | *   | ✓    |
| Xylene (total)            | .58574                                            | .60056  | .51702  | .48987  | .46416  | .53147  | 11.206 | .997702 |     |      |
| Styrene                   | 1.05881                                           | 1.08658 | .95038  | .91797  | .85272  | .97329  | 10.050 | .997274 |     |      |
| 1,1,2,2-Tetrachloroethane | .42654                                            | .42503  | .42980  | .43080  | .27229  | .39689  | 17.560 | .909953 | **  | ✓    |
| Bromofluorobenzene        | .69502                                            | .64589  | .58478  | .54906  | .54971  | .60489  | 10.576 | .999462 |     |      |

RF - Response Factor (Subscript is amount in ug/L)

RF - Average Response Factor

%RSD - Percent Relative Standard Deviation

CORRn - Coefficient of Correlation (nth degree)

CCC - Calibration Check Compounds (\*) SPCC - System Performance Check Compounds (\*\*)

## GC/MS PERFORMANCE STANDARD

Bromofluorobenzene (BFB)

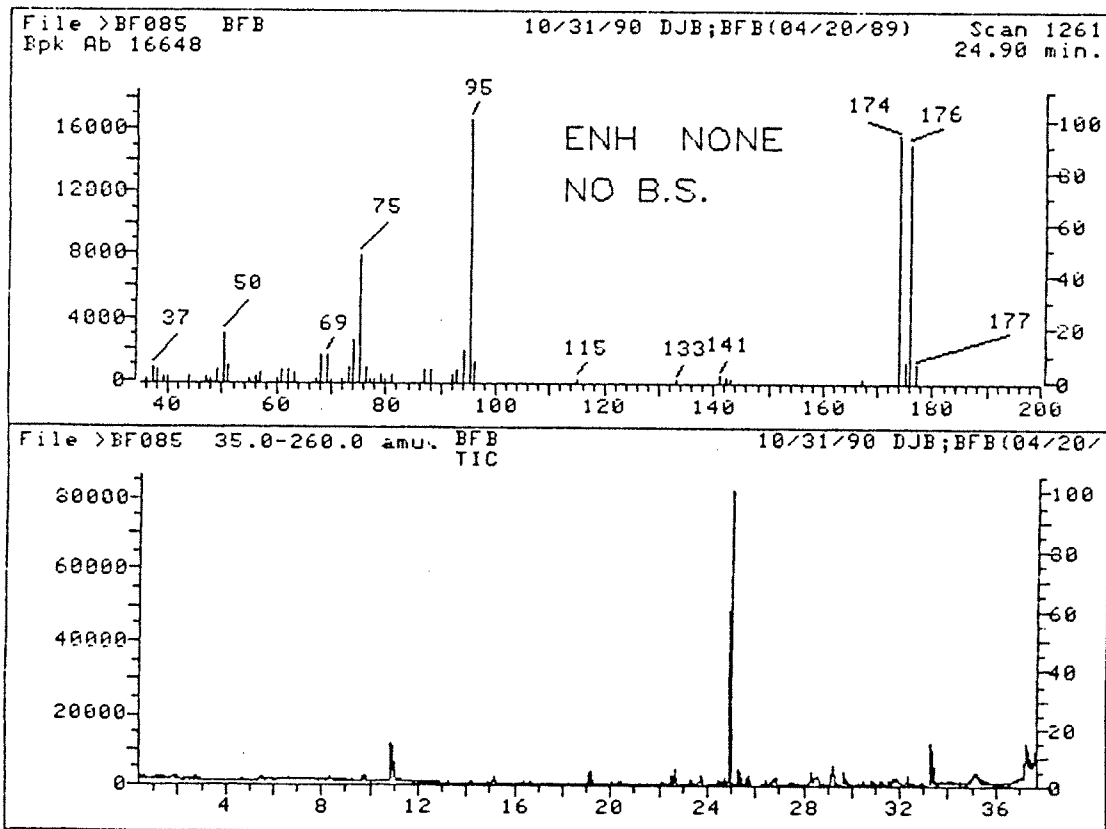
| m/z | Ion Abundance<br>Criteria          | % Relative Abundance |                     | Status |
|-----|------------------------------------|----------------------|---------------------|--------|
|     |                                    | Base<br>Peak         | Appropriate<br>Peak |        |
| 50  | 15-40% of mass 95                  | 18.11                | 18.11               | Ok     |
| 75  | 30-60% of mass 95                  | 47.79                | 47.79               | Ok     |
| 95  | Base peak, 100% relative abundance | 100.00               | 100.00              | Ok     |
| 96  | 5-9% of mass 95                    | 7.06                 | 7.06                | Ok     |
| 173 | Less than 2% of mass 174           | 0.00                 | 0.00                | Ok     |
| 174 | Greater than 50% of mass 95        | 93.69                | 93.69               | Ok     |
| 175 | 5-9% of mass 174                   | 6.82                 | 7.28                | Ok     |
| 176 | 95-101% of mass 174                | 90.64                | 96.75               | Ok     |
| 177 | 5-9% of mass 176                   | 5.95                 | 6.56                | Ok     |

Injection Date: 10/31/90

Injection Time: 20:56

Data File: &gt;BF085

Scan: 1261



## GC/MS PERFORMANCE STANDARD

Bromofluorobenzene (BFB)

| m/z | Ion Abundance<br>Criteria          | % Relative Abundance<br>Base<br>Peak | Appropriate<br>Peak | Status |
|-----|------------------------------------|--------------------------------------|---------------------|--------|
| 50  | 15-40% of mass 95                  | 18.75                                | 18.75               | Ok     |
| 75  | 30-60% of mass 95                  | 51.73                                | 51.73               | Ok     |
| 95  | Base peak, 100% relative abundance | 100.00                               | 100.00              | Ok     |
| 96  | 5-9% of mass 95                    | 6.56                                 | 6.56                | Ok     |
| 173 | Less than 2% of mass 174           | 0.00                                 | 0.00                | Ok     |
| 174 | Greater than 50% of mass 95        | 88.17                                | 88.17               | Ok     |
| 175 | 5-9% of mass 174                   | 6.06                                 | 6.87                | Ok     |
| 176 | 95-101% of mass 174                | 88.13                                | 99.95               | Ok     |
| 177 | 5-9% of mass 176                   | 5.95                                 | 6.75                | Ok     |

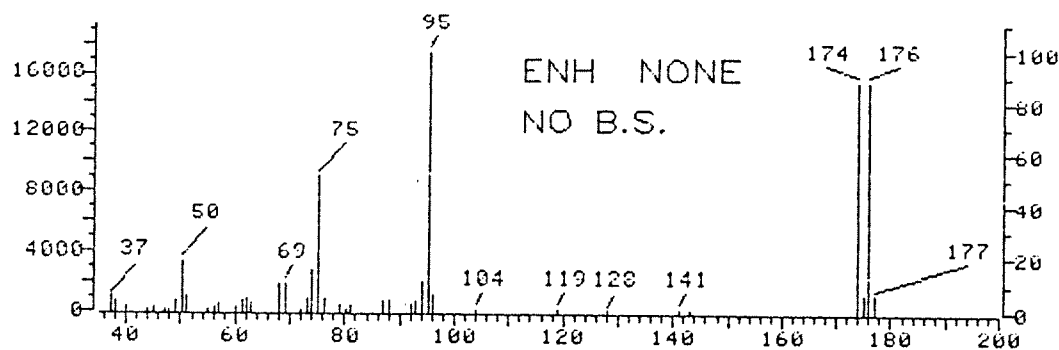
Injection Date: 11/05/90

Injection Time: 16:29

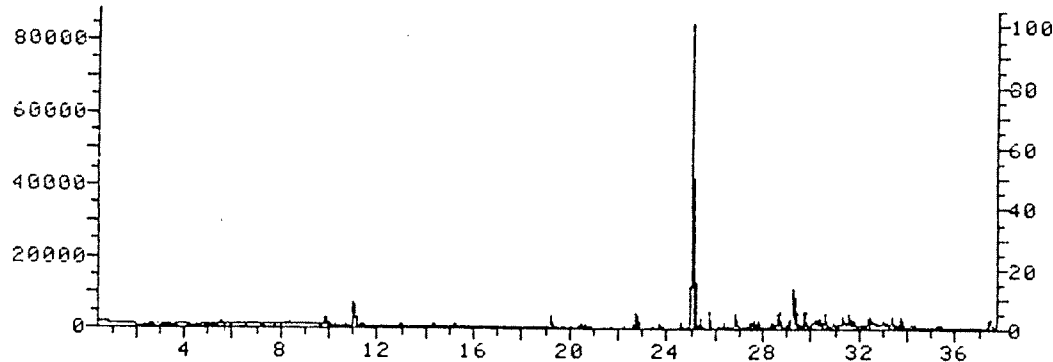
Data File: &gt;BF088

Scan: 1263

File >BF088 BFB 11/05/90 DJB;BFB(04/20/89) Scan 1263  
Bpk Ab 17432 25.00 min.



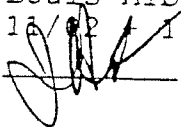
File >BF088 35.0-260.0 amu. BFB 11/05/90 DJB;BFB(04/20/89)  
TIC



# AROMATIC HYDROCARBON ANALYSIS QUALITY CONTROL

| SPIKING COMPOUND | MS/BS | %REC | STATUS | MSD/BS | %REC | STATUS |
|------------------|-------|------|--------|--------|------|--------|
| BENZENE          | 18.73 | 94%  | OK     | 19.03  | 95%  | OK     |
| TOLUENE          | 19.12 | 96%  | OK     | 19.47  | 97%  | OK     |
| FLUOROBENZENE    | 40.57 | 101% | OK     | 41.09  | 103% | OK     |

|                             |       |     |    |
|-----------------------------|-------|-----|----|
| VERAGE 602 SPIKING COMPOUND | %REC: | 96% | OK |
|                             | %RPD: | 2%  | OK |

OD: 601/602  
 S: ug/Kg  
 ANALYZED BY: Louis Albanese  
 ANALYSIS DATE: 11/03/90  
 REVIEWED BY: 

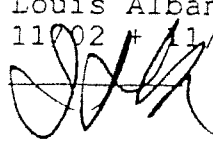
INSTRUMENT: H.P. 5890 SERIES II  
 (MAXIMA data systems w/PID #1)

# HALOCARBON ANALYSIS QUALITY CONTROL

| KING COMPOUND | MS/BS | %REC   | STATUS | MSD/BSD | %REC   | STATUS |
|---------------|-------|--------|--------|---------|--------|--------|
| 1-DCE         | 16.63 | 83%OK  |        | 16.82   | 84%OK  |        |
|               | 19.31 | 97%OK  |        | 18.70   | 94%OK  |        |
| DROBENZENE    | 50.55 | 123%OK |        | 50.01   | 122%OK |        |

|                             |       |      |    |
|-----------------------------|-------|------|----|
| TRAGE 8010 SPIKING COMPOUND | %REC: | 100% | OK |
|                             | %RPD: | 2%   | OK |

Job. No. 200911

MOD: 8010/8020  
 S: ug/Kg  
 ANALYZED BY: Louis Albanese  
 ANALYSIS DATE: 11/02 + 11/03/90  
 REVIEWED BY: 

INSTRUMENT: H.P. 5890 SERIES II  
 (TURBOCHROME data systems w/ELCD #1)

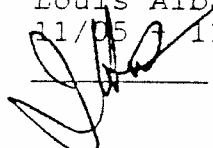


Curtis & Tompkins, Ltd. ANALYTICAL SERVICES QUALITY CONTROL  
Since 1878

1250 S. Boyle Ave., Los Angeles, CA 90023, Phone (213) 269-7421, Fax (213) 268-5328

| SPI. | COMPOUND      | MS/BS | %REC   | STATUS | MSD/BS | %REC   | STATUS |
|------|---------------|-------|--------|--------|--------|--------|--------|
|      | BENZENE       | 21.01 | 105%OK |        | 19.17  | 96%OK  |        |
|      | TOLUENE       | 20.73 | 100%OK |        | 19.24  | 96%OK  |        |
|      | CHLOROBENZENE | 50.01 | 100%OK |        | 49.81  | 100%OK |        |

|                              |       |      |    |
|------------------------------|-------|------|----|
| AVERAGE 602 SPIKING COMPOUND | %REC: | 100% | OK |
|                              | %RPD: | 6%   | OK |

|                |                                                                                     |             |                                |
|----------------|-------------------------------------------------------------------------------------|-------------|--------------------------------|
| METHOD:        | 8020                                                                                | INSTRUMENT: | H.P. 5890 SERIES II            |
| UNITS:         | ug/L                                                                                |             | (MAXIMA data systems w/PID #1) |
| ANALYZED BY:   | Louis Albanese                                                                      |             |                                |
| ANALYSIS DATE: | 11/05/90                                                                            |             |                                |
| VIEWED BY:     |  |             |                                |

Berkeley

Wilmington

Los Angeles

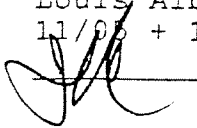
# HALOCARBON ANALYSIS QUALITY CONTROL

| SPIKING COMPOUND | MS/BS | %REC  | STATUS | MSD/BS | %REC  | STATUS |
|------------------|-------|-------|--------|--------|-------|--------|
| 1-DCE            | 15.21 | 76%OK |        | 15.79  | 79%OK |        |
| E                | 15.31 | 77%OK |        | 16.18  | 81%OK |        |
| ROBENZENE        | 30.92 | 77%OK |        | 31.02  | 78%OK |        |

|                              |       |     |    |
|------------------------------|-------|-----|----|
| VERAGE 8010 SPIKING COMPOUND | %REC: | 78% | OK |
|                              | %RPD: | 3%  | OK |

JBB No. 200911

File No. 200911B

METHOD: 8010/8020  
 TS: ug/Kg  
 ANALYZED BY: Louis Albanese  
 ANALYSIS DATE: 11/05 + 11/06/90  
 REVIEWED BY: 

INSTRUMENT: H.P. 5890 SERIES II  
 (TURBOCHROME data systems w/ELCD #1)

PID#1

=====

|               |                |       |                   |
|---------------|----------------|-------|-------------------|
| Sample Name   | : Method Blank | Time  | : 11/5/90 1:39 PM |
| Sample Number | : 5            | Study | :                 |
| Operator      | :              |       |                   |

Interface # : 1 Channel : A A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/2/90 3:41 PM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

1ST DAY BLANK

Raw Data File : C:\2700\DATA1\K2C\_005.raw  
 Result File : C:\2700\DATA1\K2C\_005.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\601602.prc  
 Sample File : c:\2700\data\601602.smp  
 Sequence File : C:\2700\DATA\CD601602.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

## 601/602 REPORT

| Peak # | Ret Time [min] | Component Name | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|----------------|--------------|---------------|-------------|----|
| 3      | 8.858          | Vinyl Chloride | 0.0000       | 65828.00      | 4060.44     | BB |
| 11     | 24.558         | Benzene        | 0.0000       | 23442.25      | 4179.13     | BB |
| 14     | 27.375         | Surrogate      | 0.0000       | 1421935.75    | 239084.11   | BB |
| 15     | 31.192         | Toluene        | 0.0000       | 30510.25      | 5713.74     | BB |
| 16     | 35.575         | ClBenzene      | 0.0000       | 9643.00       | 1755.25     | BB |
| 17     | 36.283         | 1-C-FBenzene   | 0.0000       | 2878722.50    | 554988.50   | BB |
| 18     | 36.900         | m,p-Xylene     | 0.0000       | 39392.00      | 5829.03     | BB |
| 19     | 38.150         | o-Xylene       | 0.0000       | 11716.76      | 2214.74     | BB |
| 20     | 39.358         | BFB            | 0.0000       | 99509.50      | 19449.58    | BB |
| 21     | 40.017         | BromobenzeneC  | 0.0000       | 4990873.50    | 964342.94   | BB |
| 26     | 43.575         | 1,3-DCB        | 0.0000       | 7342.00       | 1462.20     | BB |
| 27     | 43.783         | 1,4-DCB        | 0.0000       | 12725.50      | 2528.62     | BB |
| 29     | 44.900         | 1,2-DCB        | 0.0000       | 13937.25      | 2760.78     | BB |
|        |                |                | 0.0000       | 9605579.00    | 1.80e6      |    |

## Missing Component Report

| Component     | Expected Retention (Sample File) |
|---------------|----------------------------------|
| 1,1-DCE       | 15.025                           |
| trans-1,2-DCE | 17.833                           |
| cis-1,2-DCE   | 20.400                           |
| TCE           | 26.958                           |
| cis-1,3-DCP   | 28.750                           |
| trans-1,3-DCP | 30.058                           |
| PCE           | 33.933                           |
| Ethylbenzene  | 36.475                           |

P12#1

Sample Name : Method Blank Time : 11/5/90 7:33 PM  
Sample Number: 3 Study :  
Operator :

Interface # : 1 Channel : A A/D mV Range : 1000  
AutoSampler : None attached  
Rack/Vial : 0/0

Data Acquisition Time: 11/5/90 6:37 PM  
Delay Time : 5.00 min.  
End Time : 55.00 min.  
Sampling Rate : 2.0000 pts/sec

2ND DAY  
METHOD BLANK

Raw Data File : C:\2700\DATA1\K5C\_003.raw  
Result File : C:\2700\DATA1\K5C\_003.rst  
Instrument File: c:\2700\data\601602.ins  
Process File : c:\2700\data\0601602.prc  
Sample File : c:\2700\data\0601602.smp  
Sequence File : C:\2700\DATA\SEQCDK5.seq

Inj. Volume : 1 ul Area Reject : 0.00  
Sample Amount : 1.0000

# 601/602 REPORT

| Peak # | Ret Time [min] | Component Name     | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|--------------------|--------------|---------------|-------------|----|
| 2      | 8.842          | Vinyl Chloride     | 0.0000       | 54897.50      | 3526.30     | BB |
| 6      | 24.575         | Benzene            | 0.0000       | 13673.50      | 2430.50     | BB |
| 8      | 27.383         | Surrogate          | 0.0000       | 1355130.25    | 227252.06   | BB |
| 9      | 31.208         | Toluene            | 0.0000       | 14090.51      | 2679.66     | BB |
| 10     | 35.583         | ClBenzene          | 0.0000       | 8550.50       | 1585.00     | BB |
| 11     | 36.292         | 1-Cl-Fluorobenzene | 0.0000       | 2615326.50    | 506629.50   | BB |
| 12     | 36.908         | m,p-Xylene         | 0.0000       | 26669.75      | 3370.37     | BB |
| 13     | 38.158         | o-Xylene           | 0.0000       | 7698.00       | 1452.59     | BB |
| 14     | 39.367         | BFB                | 0.0000       | 3401598.00    | 668170.31   | BB |
| 15     | 40.025         | Bromobenzene       | 0.0000       | 4835144.50    | 950109.69   | BB |
| 21     | 43.783         | 1,4-DCB            | 0.0000       | 7861.00       | 1533.77     | BB |
| 23     | 44.908         | 1,2-DCB            | 0.0000       | 8564.75       | 1709.52     | BB |
|        |                |                    | 0.0000       | 12409005.00   | 2.37e6      |    |

## Missing Component Report

| Component     | Expected Retention (Sample File) |
|---------------|----------------------------------|
| 1,1-DCE       | 15.025                           |
| trans-1,2-DCE | 17.833                           |
| cis-1,2-DCE   | 20.400                           |
| TCE           | 26.958                           |
| cis-1,3-DCP   | 28.750                           |
| trans-1,3-DCP | 30.058                           |
| PCE           | 33.933                           |
| Ethylbenzene  | 36.475                           |
| 1,3-DCB       | 43.617                           |

VIV #1

Sample Name : Method Blank Time : 11/6/90 7:01 PM  
 Sample Number: 3 Study :  
 Operator : LRA

Interface # : 1 Channel : A A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/6/90 6:05 PM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

3RD DAY  
 METHOD BLANK

Raw Data File : C:\2700\DATA1\K6C\_003.raw  
 Result File : C:\2700\DATA1\K6C\_003.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\601602.prc  
 Sample File : c:\2700\data\601602.smp  
 Sequence File : C:\2700\DATA\SEQCDK6.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

### 601/602 REPORT

| Peak # | Ret Time [min] | Component Name    | Amount [ppb] | Area [uV-sec] | Height [uV] | PL |
|--------|----------------|-------------------|--------------|---------------|-------------|----|
| 8      | 8.867          | Vinyl Chloride    | 0.0000       | 51857.48      | 3574.21     | BB |
| 8      | 15.088         | 1,1-DCE           | 0.0000       | 9480.00       | 1564.25     | BB |
| 11     | 24.608         | Benzene           | 0.0000       | 15901.50      | 2846.03     | BB |
| 13     | 27.417         | Surrogate         | 0.0000       | 1352222.00    | 227184.33   | BB |
| 14     | 31.242         | Toluene           | 0.0000       | 40110.50      | 7527.06     | BB |
| 15     | 35.608         | ClBenzene         | 0.0000       | 10709.50      | 1949.38     | BB |
| 16     | 36.325         | 1-C-Fluorobenzene | 0.0000       | 2629241.50    | 507347.16   | BB |
| 17     | 36.942         | m,p-Xylene        | 0.0000       | 46604.75      | 8766.78     | BB |
| 19     | 38.192         | o-Xylene          | 0.0000       | 13766.00      | 2612.52     | BB |
| 20     | 39.400         | BFB               | 0.0000       | 3673572.75    | 722456.63   | BB |
| 21     | 40.050         | BromobenzeneC     | 0.0000       | 5414144.50    | 991693.33   | BB |
| 27     | 43.617         | 1,3-DCE           | 0.0000       | 6515.54       | 1753.22     | BB |
| 28     | 43.825         | 1,4-DCE           | 0.0000       | 13466.50      | 2661.14     | BB |
| 29     | 44.942         | 1,2-DCE           | 0.0000       | 15674.00      | 3008.07     | BB |
|        |                |                   | 0.0000       | 13295266.00   | 2.48e6      |    |

### Missing Component Report

| Component     | Expected Retention (Sample File) |
|---------------|----------------------------------|
| trans-1,2-DCE | 17.833                           |
| cis-1,2-DCE   | 20.400                           |
| DCE           | 26.958                           |
| cis-1,3-DCP   | 28.750                           |
| trans-1,3-DCP | 30.058                           |
| DCE           | 33.933                           |
| Ethylbenzene  | 36.475                           |

PID# 1

Sample Name : 601/602 5ppb Time : 11/5/90 1:37 PM  
 Sample Number : 4 Study :  
 Operator :

Interface # : 1 Channel : A A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/2/90 2:38 PM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

1ST DAY  
 SPT.

Raw Data File : C:\2700\DATA1\K2C\_004.raw  
 Result File : C:\2700\DATA1\K2C\_004.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\CD601602.prc  
 Sample File : c:\2700\data\CD601602.smp  
 Sequence File : C:\2700\DATA\CD601602.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

### 601/602 REPORT

| Peak # | Ret Time [min] | Component Name | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|----------------|--------------|---------------|-------------|----|
| 8      | 8.825          | Vinyl Chloride | 0.0000       | 100848.97     | 5468.70     | BV |
| 9      | 15.058         | 1,1-DCE        | 0.0000       | 89970.02      | 12258.66    | BB |
| 10     | 17.850         | trans-1,2-DCE  | 0.0000       | 811882.97     | 59427.75    | BB |
| 12     | 20.408         | cis-1,2-DCE    | 0.0000       | 8894.00       | 1252.00     | BB |
| 14     | 24.558         | Benzene        | 0.0000       | 433592.00     | 76175.00    | BB |
| 17     | 26.942         | TCE            | 0.0000       | 258221.75     | 46577.31    | BB |
| 18     | 27.375         | Surrogate      | 0.0000       | 1466412.50    | 246402.80   | BB |
| 21     | 28.858         | cis-1,3-DCP    | 0.0000       | 55477.00      | 10516.00    | BB |
| 23     | 30.038         | trans-1,3-DCP  | 0.0000       | 45180.00      | 8952.09     | BB |
| 24     | 31.192         | Toluene        | 0.0000       | 426570.50     | 80078.47    | BB |
| 25     | 33.900         | PCE            | 0.0000       | 236778.50     | 41609.21    | BB |
| 27     | 35.567         | DiBenzene      | 0.0000       | 360086.50     | 170044.00   | BB |
| 28     | 36.288         | 1-C-FBenzene   | 0.0000       | 2713565.00    | 518167.50   | BV |
| 29     | 36.475         | Ethylbenzene   | 0.0000       | 398626.63     | 74075.30    | VB |
| 30     | 36.917         | m,p-Xylene     | 0.0000       | 904091.75     | 119106.30   | BB |
| 32     | 38.150         | o-Xylene       | 0.0000       | 372643.50     | 70159.34    | BB |
| 33     | 39.358         | BFB            | 0.0000       | 145064.00     | 28108.33    | BB |
| 34     | 40.008         | BromobenzeneC  | 0.0000       | 5428024.00    | 991921.56   | BB |
| 39     | 43.567         | 1,3-DCB        | 0.0000       | 781345.25     | 152792.64   | BV |
| 40     | 43.775         | 1,4-DCB        | 0.0000       | 761578.44     | 152654.33   | VB |
| 41     | 44.892         | 1,2-DCB        | 0.0000       | 616421.00     | 118601.09   | BB |

0.0000 16427264.00 2.97e6

Missing Component Report  
 Component

Expected Retention (Sample File)

PID# /

Sample Name : 601/602 10ppb Time : 11/5/90 1:33 PM  
 Sample Number : 3 Study :  
 Operator :

Interface # : 1 Channel : A A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/2/90 1:35 PM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

1st DAY  
10pt

Raw Data File : C:\2700\DATA1\K2C\_003.raw  
 Result File : C:\2700\DATA1\K2C\_003.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\601602.prc  
 Sample File : c:\2700\data\601602.smp  
 Sequence File : C:\2700\DATA\CD601602.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

### 601/602 REPORT

| Peak # | Ret Time [min] | Component Name | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|----------------|--------------|---------------|-------------|----|
| 4      | 8.767          | Vinyl Chloride | 0.0000       | 35300.02      | 4153.65     | BB |
| 8      | 15.008         | 1,1-DCE        | 0.0000       | 180292.48     | 24908.39    | BB |
| 9      | 17.825         | trans-1,2-DCE  | 0.0000       | 638163.50     | 109968.56   | BB |
| 11     | 20.392         | cis-1,2-DCE    | 0.0000       | 13363.00      | 2542.50     | BB |
| 13     | 24.558         | Benzene        | 0.0000       | 918491.75     | 163057.50   | BV |
| 17     | 26.950         | TCE            | 0.0000       | 519768.50     | 94482.83    | BB |
| 18     | 27.375         | Surrogate      | 0.0000       | 1319593.50    | 222363.44   | BB |
| 21     | 28.867         | cis-1,3-DCP    | 0.0000       | 173602.25     | 33244.32    | BB |
| 23     | 30.042         | trans-1,3-DCP  | 0.0000       | 203496.23     | 40776.54    | BB |
| 24     | 31.200         | Toluene        | 0.0000       | 798638.50     | 150794.25   | BB |
| 27     | 33.917         | PCE            | 0.0000       | 397646.50     | 72368.00    | BB |
| 29     | 35.575         | ClBenzene      | 0.0000       | 1667306.50    | 323339.69   | BB |
| 30     | 36.292         | 1-Cl-EBenzene  | 0.0000       | 2600790.50    | 499826.33   | BV |
| 31     | 36.483         | Ethylbenzene   | 0.0000       | 713222.06     | 134059.08   | VB |
| 32     | 36.933         | m,p-Xylene     | 0.0000       | 1643296.50    | 214979.33   | BV |
| 34     | 38.158         | o-Xylene       | 0.0000       | 690916.00     | 130794.00   | BB |
| 35     | 39.367         | BFB            | 0.0000       | 144162.50     | 27982.00    | BB |
| 36     | 40.025         | BromobenzeneC  | 0.0000       | 5010254.50    | 972987.21   | BB |
| 41     | 43.575         | 1,3-DCB        | 0.0000       | 1433150.25    | 280984.59   | BV |
| 42     | 43.783         | 1,4-DCB        | 0.0000       | 1386549.25    | 279467.59   | VB |
| 43     | 44.900         | 1,2-DCB        | 0.0000       | 1129576.00    | 219021.86   | BB |

0.0000 21618786.00 4.00e6

#### Missing Component Report

Component Expected Retention (Sample File)

P10#1

Sample Name : 601/602 20ppb Time : 11/5/90 1:31 PM  
 Sample Number : 2 Study :  
 Operator :

Interface # : 1 Channel : A A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/2/90 12:33 PM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

1ST  
PAY  
20pt.

Raw Data File : C:\2700\DATA1\K2C\_002.raw  
 Result File : C:\2700\DATA1\K2C\_002.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\601602.prc  
 Sample File : c:\2700\data\601602.smp  
 Sequence File : C:\2700\DATA\601602.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

# 601/602 REPORT

| Peak # | Ret Time [min] | Component Name | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|----------------|--------------|---------------|-------------|----|
| 4      | 8.767          | Vinyl Chloride | 0.0000       | 40238.06      | 5371.48     | BB |
| 9      | 15.017         | 1,1-DCE        | 0.0000       | 293431.34     | 40304.60    | BB |
| 10     | 17.833         | trans-1,2-DCE  | 0.0000       | 1129057.50    | 192523.59   | BB |
| 12     | 20.400         | cis-1,2-DCE    | 0.0000       | 26317.00      | 4723.50     | BB |
| 16     | 24.567         | Benzene        | 0.0000       | 1620877.00    | 236634.53   | BB |
| 19     | 26.950         | TCE            | 0.0000       | 953252.00     | 174920.50   | BB |
| 20     | 27.333         | Surrogate      | 0.0000       | 1239637.50    | 219017.27   | BB |
| 23     | 28.875         | cis-1,3-DCP    | 0.0000       | 332433.00     | 63301.47    | BB |
| 25     | 30.050         | trans-1,3-DCP  | 0.0000       | 392323.00     | 78706.52    | BB |
| 26     | 31.208         | Toluene        | 0.0000       | 1473134.50    | 277447.03   | BB |
| 28     | 33.925         | PCE            | 0.0000       | 733538.00     | 134580.02   | BB |
| 30     | 35.583         | ClBenzene      | 0.0000       | 3158772.75    | 612222.13   | BB |
| 31     | 36.300         | 1-C-FBenzene   | 0.0000       | 2549255.50    | 483634.31   | BV |
| 32     | 36.432         | Ethylbenzene   | 0.0000       | 1340596.63    | 253959.66   | VB |
| 33     | 36.942         | m,p-Xylene     | 0.0000       | 3081532.00    | 404195.28   | BV |
| 35     | 38.167         | o-Xylene       | 0.0000       | 1309793.00    | 247125.91   | BB |
| 36     | 39.375         | BFB            | 0.0000       | 244917.50     | 47946.39    | BB |
| 37     | 40.033         | BromobenzeneC  | 0.0000       | 5047980.00    | 973949.63   | BB |
| 43     | 43.583         | 1,3-DCB        | 0.0000       | 2795267.25    | 545104.25   | VV |
| 44     | 43.792         | 1,4-DCB        | 0.0000       | 2692486.00    | 539700.63   | VB |
| 45     | 44.908         | 1,2-DCB        | 0.0000       | 2212932.00    | 427213.06   | BB |
|        |                |                | 0.0000       | 32733924.00   | 6.02e6      |    |

Missing Component Report

Component Expected Retention (Sample File)

PID#1

Sample Name : 601/602 50ppb Time : 11/5/90 1:28 PM  
 Sample Number : 1 Study :  
 Operator :

Interface # : 1 Channel : A A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/2/90 11:31 AM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

1ST  
 DAY  
 30pt.

Raw Data File : C:\2700\DATA1\K2C\_001.raw  
 Result File : C:\2700\DATA1\K2C\_001A.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\C601602.prc  
 Sample File : c:\2700\data\C601602.smp  
 Sequence File : C:\2700\DATA\CD601602.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

## 601/602 REPORT

| Peak # | Ret Time [min] | Component Name    | Amount [ppb] | Area [uV-sec] | Height [uV] | EL |
|--------|----------------|-------------------|--------------|---------------|-------------|----|
| 5      | 8.883          | Vinyl Chloride    | 0.0000       | 287210.94     | 29107.49    | VV |
| 12     | 15.092         | 1,1-DCE           | 0.0000       | 959635.13     | 126086.56   | BB |
| 14     | 17.892         | trans-1,2-DCE     | 0.0000       | 3503070.75    | 595080.44   | BB |
| 16     | 20.467         | cis-1,2-DCE       | 0.0000       | 75752.48      | 13194.67    | BB |
| 24     | 24.633         | Benzene           | 0.0000       | 4227732.00    | 741949.63   | EV |
| 30     | 27.025         | TCE               | 0.0000       | 2641987.50    | 478528.56   | BB |
| 31     | 27.458         | Surrogate         | 0.0000       | 1487627.25    | 240366.80   | BB |
| 34     | 28.950         | cis-1,3-DCP       | 0.0000       | 824515.50     | 157382.48   | BB |
| 36     | 30.133         | trans-1,3-DCP     | 0.0000       | 659080.00     | 171268.14   | BB |
| 38     | 31.292         | Toluene           | 0.0000       | 3916798.25    | 728465.06   | BB |
| 40     | 34.000         | PCE               | 0.0000       | 2208883.00    | 394943.31   | BB |
| 42     | 35.642         | ClBenzene         | 0.0000       | 6790926.50    | 991425.38   | BB |
| 43     | 36.383         | 1-C-Fluorobenzene | 0.0000       | 2757900.50    | 527621.88   | EV |
| 44     | 36.575         | Ethylbenzene      | 0.0000       | 3539908.50    | 663814.50   | VB |
| 45     | 37.000         | m,p-Xylene        | 0.0000       | 7828996.50    | 991127.88   | EV |
| 48     | 38.250         | o-Xylene          | 0.0000       | 3419073.50    | 642731.63   | BB |
| 49     | 39.458         | BFB               | 0.0000       | 141186.25     | 27355.43    | BB |
| 51     | 40.108         | BromobenzeneC     | 0.0000       | 5310353.00    | 991164.19   | BB |
| 57     | 43.633         | 1,3-DCE           | 0.0000       | 6467432.00    | 990707.69   | EV |
| 58     | 43.842         | 1,4-DCB           | 0.0000       | 6256184.00    | 990027.25   | VB |
| 60     | 44.975         | 1,2-DCB           | 0.0000       | 5673663.50    | 989716.81   | BB |
|        |                |                   | 0.0000       | 69226976.00   | 1.14e7      |    |

Missing Component Report  
 Component

Expected Retention (Sample File)

PID #1

=====

|               |                 |       |                   |
|---------------|-----------------|-------|-------------------|
| Sample Name   | : 601/602 05ppb | Time  | : 11/5/90 6:31 PM |
| Sample Number | : 2             | Study | :                 |
| Operator      | :               |       |                   |

Interface # : 1 Channel : A A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Visl : 0/0

Data Acquisition Time: 11/5/90 5:35 PM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

05ppb  
 2ND DAY STD.

Raw Data File : C:\2700\DATA\1\K5C\_002.raw  
 Result File : C:\2700\DATA\1\K5C\_002.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\601602.prc  
 Sample File : c:\2700\data\601602.smp  
 Sequence File : C:\2700\DATA\SEQUCK5.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

601/602 REPORT

| Peak # | Ret Time [min] | Component Name | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|----------------|--------------|---------------|-------------|----|
| 3      | 8.788          | Vinyl Chloride | 0.0000       | 30699.97      | 2607.95     | BB |
| 6      | 15.033         | 1,1-DCE        | 0.0000       | 85342.02      | 12216.39    | BB |
| 7      | 17.833         | trans-1,2-DCE  | 0.0000       | 215245.03     | 56633.77    | BB |
| 9      | 20.400         | cis-1,2-DCE    | 0.0000       | 7071.50       | 1299.00     | BB |
| 11     | 24.558         | Benzene        | 0.0000       | 436513.50     | 76816.14    | BV |
| 15     | 26.950         | TCE            | 0.0000       | 251013.00     | 45609.00    | BB |
| 16     | 27.383         | Surrogate      | 0.0000       | 1297790.50    | 217826.94   | BB |
| 19     | 28.867         | cis-1,3-DCP    | 0.0000       | 78274.00      | 14840.29    | BB |
| 21     | 30.050         | trans-1,3-DCP  | 0.0000       | 88127.25      | 17520.74    | BB |
| 22     | 31.200         | Toluene        | 0.0000       | 414427.75     | 77654.90    | BB |
| 23     | 33.917         | PCE            | 0.0000       | 206823.25     | 37256.69    | BB |
| 25     | 35.575         | oIBenzene      | 0.0000       | 664491.50     | 167526.70   | BB |
| 26     | 36.292         | 1-C-FBenzene   | 0.0000       | 2594953.00    | 501326.63   | BV |
| 27     | 36.483         | Ethylbenzene   | 0.0000       | 390564.00     | 73012.75    | VB |
| 28     | 36.933         | m,p-Xylene     | 0.0000       | 904840.00     | 119035.48   | BB |
| 30     | 38.158         | o-Xylene       | 0.0000       | 374463.50     | 70155.67    | BB |
| 31     | 39.367         | BFB            | 0.0000       | 3512023.75    | 692332.33   | BB |
| 32     | 40.025         | BromobenzeneD  | 0.0000       | 5215956.50    | 991723.63   | BB |
| 37     | 43.575         | 1,3-DCE        | 0.0000       | 776370.75     | 151053.02   | BV |
| 38     | 43.783         | 1,4-DCE        | 0.0000       | 756230.75     | 151428.16   | VB |
| 40     | 44.900         | 1,2-DCE        | 0.0000       | 611332.50     | 118936.65   | BB |

0.0000 19212606.00 3.59e6

Missing Component Report

|           |                                  |
|-----------|----------------------------------|
| Component | Expected Retention (Sample File) |
|-----------|----------------------------------|

PID#1

Sample Name : 601/602 50PPB Time : 11/6/90 4:58 PM  
 Sample Number: 1 Study :  
 Operator : LRA

Interface # : 1 Channel : A A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/6/90 4:01 PM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

3RD PAY  
 STD.  
 50ppb

Raw Data File : C:\2700\DATA1\K6C\_001.raw  
 Result File : C:\2700\DATA1\K6C\_001.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\601602.prc  
 Sample File : c:\2700\data\601602.smp  
 Sequence File : C:\2700\DATA\SEDCCK6.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

# 601/602 REPORT

| Peak # | Ret Time [min] | Component Name     | Amount [ppb] | Area [uV-sec] | Height [uV] | EL |
|--------|----------------|--------------------|--------------|---------------|-------------|----|
| 5      | 9.742          | Vinyl Chloride     | 0.0000       | 291077.81     | 24218.18    | VB |
| 11     | 15.017         | 1,1-DCE            | 0.0000       | 1073187.00    | 132770.69   | BE |
| 14     | 17.833         | trans-1,2-DCE      | 0.0000       | 3311059.75    | 578545.56   | BE |
| 18     | 20.408         | cis-1,2-DCE        | 0.0000       | 69279.48      | 12248.71    | BE |
| 25     | 24.583         | Benzene            | 0.0000       | 4086653.50    | 705219.94   | BV |
| 31     | 26.983         | TCE                | 0.0000       | 2451326.50    | 448339.28   | BE |
| 32     | 27.408         | Surrogate          | 0.0000       | 1338352.00    | 224693.00   | BE |
| 35     | 28.908         | cis-1,3-DCP        | 0.0000       | 815018.00     | 154362.14   | BE |
| 37     | 30.083         | trans-1,3-DCP      | 0.0000       | 911065.50     | 183091.30   | BE |
| 39     | 31.242         | Toluene            | 0.0000       | 3722688.00    | 694746.69   | BE |
| 43     | 33.967         | PCE                | 0.0000       | 1368552.50    | 357107.63   | BE |
| 45     | 35.600         | ClBenzene          | 0.0000       | 6596743.00    | 991913.31   | BE |
| 46     | 36.342         | 1-Cl-Fluorobenzene | 0.0000       | 2671631.00    | 512675.09   | BV |
| 47     | 36.542         | Ethylbenzene       | 0.0000       | 3343551.50    | 628744.94   | VB |
| 48     | 36.983         | m,p-Xylene         | 0.0000       | 7640410.00    | 991426.19   | BV |
| 52     | 38.217         | o-Xylene           | 0.0000       | 3243166.00    | 611620.63   | BE |
| 53     | 39.425         | BFB                | 0.0000       | 3680969.75    | 723191.75   | BV |
| 55     | 40.067         | BromobenzeneD      | 0.0000       | 5555904.00    | 991610.94   | BV |
| 63     | 43.608         | 1,3-DCE            | 0.0000       | 6223545.50    | 991378.25   | BV |
| 64     | 43.817         | 1,4-DCE            | 0.0000       | 6005550.50    | 990339.56   | VB |
| 66     | 44.950         | 1,2-DCE            | 0.0000       | 5321919.50    | 990453.75   | BE |
|        |                |                    | 0.0000       | 70272256.00   | 1.19e7      |    |

Missing Component Report

| Component | Expected Retention (Sample File) |
|-----------|----------------------------------|
|-----------|----------------------------------|

ELCD#1

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|               |                |       |                   |
|---------------|----------------|-------|-------------------|
| Sample Name   | : Method Blank | Time  | : 11/5/90 1:40 PM |
| Sample Number | : 5            | Study | :                 |
| Operator      | :              |       |                   |

Interface # : 1 Channel : B A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/2/90 3:41 PM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

*1ST DAY  
BLANK*

Raw Data File : C:\2700\DATA1\K2D\_005.raw  
 Result File : C:\2700\DATA1\K2D\_005.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\601602.prc  
 Sample File : c:\2700\data\601602.smp  
 Sequence File : C:\2700\DATA\CD601602.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

# 601/602 REPORT

| Peak # | Ret. Time [min] | Component Name   | Amount [ppb] | Area [uV-sec] | Height [uV] | EL |
|--------|-----------------|------------------|--------------|---------------|-------------|----|
| 2      | 8.233           | ClMethane        | 0.0000       | 23561.51      | 2715.37     | BB |
| 3      | 10.292          | BrMethane        | 0.0000       | 14388.29      | 2207.66     | BB |
| 5      | 15.050          | 1,1-DCE          | 0.0000       | 9308.00       | 1368.65     | BB |
| 6      | 15.383          | DCM              | 0.0000       | 153294.42     | 14325.33    | BB |
| 7      | 16.125          | Freon113         | 0.0000       | 57227.48      | 6541.15     | BB |
| 8      | 20.992          | Chloroform       | 0.0000       | 7974.52       | 1438.10     | BB |
| 9      | 23.517          | 1,1,1-TCA        | 0.0000       | 106978.73     | 14301.20    | BB |
| 11     | 26.953          | TCE              | 0.0000       | 21657.00      | 2139.91     | BB |
| 13     | 33.933          | PCE              | 0.0000       | 25082.75      | 4027.00     | BB |
| 14     | 35.600          | ClBenzene        | 0.0000       | 10181.98      | 1599.57     | BB |
| 15     | 36.292          | 1-C-2-FlBenzeneD | 0.0000       | 3231641.50    | 515622.81   | BB |
| 16     | 38.117          | 1,1,2,2-TCA      | 0.0000       | 7037.99       | 1134.00     | BB |
| 17     | 39.392          | BFB              | 0.0000       | 93420.52      | 13434.91    | BB |
| 18     | 40.033          | Bromobenzene     | 0.0000       | 4359739.00    | 530374.50   | BB |
| 19     | 43.600          | 1,3-DCB          | 0.0000       | 15629.06      | 2551.36     | BV |
| 20     | 43.800          | 1,4-DCB          | 0.0000       | 28142.45      | 4611.53     | VE |
| 21     | 44.925          | 1,2-DCB          | 0.0000       | 32738.98      | 5485.32     | BB |
|        |                 |                  | 0.0000       | 8198004.50    | 1.17e6      |    |

## Missing Component Report

| Component      | Expected Retention (Sample File) |
|----------------|----------------------------------|
| Freon12        | 7.600                            |
| Vinyl Chloride | 8.300                            |
| peak5          | 9.150                            |
| ClEthane       | 10.808                           |

ELCD #1

Sample Name : Method Blank Time : 11/5/90 7:34 PM  
Sample Number: 3 Study :  
Operator :

Interface # : 1 Channel : B A/D mV Range : 1000  
AutoSampler : None attached  
Rack/Vial : 0/0

Data Acquisition Time: 11/5/90 6:37 PM  
Delay Time : 5.00 min.  
End Time : 55.00 min.  
Sampling Rate : 2.0000 pts/sec

2ND DAY  
BLANK

Raw Data File : C:\2700\DATA1\K5D\_003.raw  
Result File : C:\2700\DATA1\K5D\_003.rst  
Instrument File: c:\2700\data\I601602.ins  
Process File : c:\2700\data\I601602.prc  
Sample File : c:\2700\data\I601602.smp  
Sequence File : C:\2700\DATA\SEQUCK5.seq

Inj. Volume : 1 ul Area Reject : 0.00  
Sample Amount : 1.0000

# 601/602 REPORT

| Peak # | Ret Time [min] | Component Name   | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|------------------|--------------|---------------|-------------|----|
| 2      | 8.242          | ClMethane        | 0.0000       | 7347.76       | 1021.80     | BB |
| 3      | 10.325         | BrMethane        | 0.0000       | 20017.06      | 2156.04     | BB |
| 5      | 15.067         | 1,1-DCE          | 0.0000       | 11446.50      | 1639.35     | BB |
| 6      | 15.400         | DCM              | 0.0000       | 39278.52      | 4647.15     | BB |
| 7      | 16.142         | Freon113         | 0.0000       | 16730.00      | 2004.75     | BB |
| 8      | 21.153         | Chloroform       | 0.0000       | 8759.49       | 1425.81     | BB |
| 9      | 23.525         | 1,1,1-TCA        | 0.0000       | 31072.50      | 12365.67    | BB |
| 11     | 35.608         | ClBenzene        | 0.0000       | 6611.43       | 1206.96     | BB |
| 12     | 36.300         | 1-C-2-FlBenzeneD | 0.0000       | 2343513.50    | 469752.44   | BB |
| 13     | 39.125         | 1,1,2,2-TCA      | 0.0000       | 4314.52       | 765.08      | BB |
| 14     | 39.383         | BFB              | 0.0000       | 3331721.00    | 449042.22   | BB |
| 15     | 40.042         | Bromobenzene     | 0.0000       | 3027616.00    | 521937.50   | BB |
| 18     | 43.608         | 1,3-DCB          | 0.0000       | 7130.33       | 1173.27     | BV |
| 19     | 43.808         | 1,4-DCB          | 0.0000       | 14234.70      | 2394.46     | VB |
| 20     | 44.925         | 1,2-DCB          | 0.0000       | 18489.01      | 3110.24     | BB |
|        |                |                  | 0.0000       | 9548337.00    | 1.47e6      |    |

## Missing Component Report

| Component      | Expected Retention (Sample File) |
|----------------|----------------------------------|
| Freon12        | 7.600                            |
| Vinyl Chloride | 8.800                            |
| peak5          | 9.150                            |
| ClEthane       | 10.908                           |
| Freon11        | 13.233                           |
| trans-1,1-DCE  | 17.342                           |

=====

Sample Name : Method Blank                      Time : 11/6/90 7:01 PM  
Sample Number: 2                                  Study :  
Operator : LRA

Interface # : 1                      Channel : B                      A/D mV Range : 1000  
AutoSampler : None attached  
Rack/Vial : 0/0

Data Acquisition Time: 11/6/90 6:05 PM  
Delay Time : 5.00 min.  
End Time : 55.00 min.  
Sampling Rate : 2.0000 pts/sec

Raw Data File : C:\2700\DATA\K6D\_003.raw  
Result File : C:\2700\DATA\K6D\_003.rst  
Instrument File: c:\2700\data\601602.ins  
Process File : c:\2700\data\D601602.prc  
Sample File : c:\2700\data\D601602.smp  
Sequence File : C:\2700\DATA\SEQUCK6.seq

Inj. Volume : 1 ul                      Area Reject : 0.00  
Sample Amount : 1.0000

=====

601/602 REPORT

| Peak # | Ret Time [min] | Component Name  | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|-----------------|--------------|---------------|-------------|----|
| 1      | 8.267          | CHMethane       | 0.0000       | 16194.24      | 1688.06     | BB |
| 2      | 10.375         | BrMethane       | 0.0000       | 27399.53      | 2362.93     | BB |
| 4      | 13.342         | Freon11         | 0.0000       | 26655.02      | 2991.90     | BB |
| 5      | 15.100         | 1,1-DCE         | 0.0000       | 61269.50      | 8981.20     | BB |
| 6      | 15.433         | DCM             | 0.0000       | 93391.95      | 9714.75     | BB |
| 7      | 16.175         | Freon113        | 0.0000       | 39956.77      | 4622.78     | BB |
| 8      | 21.175         | Chloroform      | 0.0000       | 10756.99      | 1728.71     | BB |
| 9      | 23.558         | 1,1,1-TCA       | 0.0000       | 417565.75     | 55885.32    | BB |
| 10     | 26.488         | 1,2-DCP         | 0.0000       | 5736.75       | 951.19      | BB |
| 12     | 33.975         | PCE             | 0.0000       | 15055.50      | 2520.19     | BB |
| 13     | 35.633         | CHBenzene       | 0.0000       | 10725.00      | 1787.86     | BB |
| 14     | 36.333         | 1-C-2-FBenzeneD | 0.0000       | 2826144.00    | 457267.56   | BB |
| 15     | 38.150         | 1,1,2,2-TCA     | 0.0000       | 7047.99       | 1172.89     | BB |
| 16     | 39.417         | BFB             | 0.0000       | 3254408.75    | 450933.19   | BB |
| 17     | 40.075         | Bromobenzene    | 0.0000       | 4497592.00    | 629075.75   | BB |
| 19     | 43.633         | 1,3-DCB         | 0.0000       | 20239.61      | 3366.62     | BB |
| 20     | 43.842         | 1,4-DCB         | 0.0000       | 30731.40      | 5052.33     | BB |
| 21     | 44.958         | 1,2-DCB         | 0.0000       | 38300.25      | 6360.00     | BB |

0.0000 11399181.00 1.64e6

Missing Component Report

| Component      | Expected Retention (Sample File) |
|----------------|----------------------------------|
| Freon12        | 7.600                            |
| Vinyl Chloride | 8.800                            |
| peak5          | 9.150                            |

ELCD #1

Sample Name : 601/602 5ppb  
 Sample Number : 4  
 Operator :

Time : 11/5/90 1:38 PM  
 Study :

Interface # : 1 Channel : B A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/2/90 2:38 PM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

1ST DAY  
 5pt. Std.

Raw Data File : C:\2700\DATA1\K2D\_004.raw  
 Result File : C:\2700\DATA1\K2D\_004.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\D601602.prc  
 Sample File : c:\2700\data\D601602.smp  
 Sequence File : C:\2700\DATA\CD601602.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

## 601/602 REPORT

| Peak # | Ret Time [min] | Component Name       | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|----------------------|--------------|---------------|-------------|----|
| 2      | 7.675          | Freon12              | 0.0000       | 29615.77      | 3480.70     | BB |
| 3      | 8.217          | ClMethane            | 0.0000       | 379279.50     | 35384.73    | BB |
| 4      | 8.842          | Vinyl Chloride       | 0.0000       | 214578.13     | 27050.65    | BV |
| 5      | 9.200          | peak5                | 0.0000       | 67370.63      | 4963.37     | VB |
| 6      | 10.300         | BrMethane            | 0.0000       | 379268.06     | 24020.45    | BV |
| 7      | 10.867         | ClEthane             | 0.0000       | 492805.00     | 34062.09    | VB |
| 9      | 13.275         | Freon11              | 0.0000       | 344092.91     | 23328.87    | BB |
| 10     | 15.075         | 1,1-DCE              | 0.0000       | 572639.63     | 67098.70    | BV |
| 11     | 15.383         | DCM                  | 0.0000       | 1489883.63    | 107312.17   | VV |
| 12     | 16.108         | Freon113             | 0.0000       | 1181621.25    | 104040.22   | VB |
| 13     | 17.858         | trans-1,1-DCE        | 0.0000       | 843602.63     | 117232.52   | BV |
| 14     | 18.375         | 1,1-DCA              | 0.0000       | 903982.88     | 120974.83   | VB |
| 15     | 20.425         | cis-1,1-DCE          | 0.0000       | 38981.48      | 6087.25     | BB |
| 16     | 21.125         | Chloroform           | 0.0000       | 1285375.50    | 183198.47   | BB |
| 17     | 22.883         | 1,2-DCA              | 0.0000       | 838811.06     | 131427.59   | BB |
| 18     | 23.517         | 1,1,1-TCA            | 0.0000       | 1032400.50    | 135152.67   | BB |
| 19     | 24.925         | Carbon Tetrachloride | 0.0000       | 993302.50     | 136098.02   | BB |
| 21     | 26.433         | 1,2-DCP              | 0.0000       | 1043499.75    | 142372.11   | VB |
| 22     | 26.850         | BDCM                 | 0.0000       | 790537.31     | 142361.14   | BV |
| 23     | 26.958         | TCE                  | 0.0000       | 1272950.50    | 191821.66   | VV |
| 25     | 28.142         | 2-DEVE               | 0.0000       | 23263.70      | 3946.21     | BV |
| 27     | 28.875         | cis-1,3-DCP          | 0.0000       | 471521.00     | 75274.34    | BB |
| 29     | 30.050         | trans-1,3-DCP        | 0.0000       | 283676.25     | 46873.29    | BV |
| 30     | 30.508         | 1,1,2-TCA            | 0.0000       | 847239.69     | 134705.27   | VB |
| 32     | 32.208         | BDCM                 | 0.0000       | 723532.50     | 99322.44    | BB |
| 34     | 33.917         | PCE                  | 0.0000       | 1348104.50    | 206094.94   | BB |
| 36     | 35.575         | ClBenzene            | 0.0000       | 905582.06     | 147781.72   | BB |
| 37     | 36.292         | 1-C-2-FBenzeneD      | 0.0000       | 3044720.50    | 486664.78   | BB |

ELCD# 1

=====

Sample Name : 601/602 10ppb Time : 11/5/90 1:35 PM  
 Sample Number: 3 Study :  
 Operator :

Interface # : 1 Channel : B A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/2/90 1:35 PM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

Raw Data File : C:\2700\DATA1\K2D\_003.raw  
 Result File : C:\2700\DATA1\K2D\_003.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\D601602.prc  
 Sample File : c:\2700\data\D601602.smp  
 Sequence File : C:\2700\DATA1\CD601602.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

## 601/602 REPORT

| Peak # | Ret Time [min] | Component Name       | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|----------------------|--------------|---------------|-------------|----|
| 1      | 7.583          | Freon12              | 0.0000       | 31476.26      | 3743.92     | BB |
| 2      | 8.142          | ClMethane            | 0.0000       | 401604.00     | 36774.23    | BB |
| 3      | 8.783          | Vinyl Chloride       | 0.0000       | 327001.81     | 39943.86    | BV |
| 4      | 9.175          | peak5                | 0.0000       | 24410.72      | 2575.28     | VB |
| 5      | 10.217         | BrMethane            | 0.0000       | 529437.44     | 34355.41    | BV |
| 6      | 10.783         | ClEthane             | 0.0000       | 1017424.88    | 58905.02    | VB |
| 7      | 13.208         | Freon11              | 0.0000       | 662133.38     | 39499.12    | BB |
| 8      | 15.025         | 1,1-DCE              | 0.0000       | 986179.19     | 119786.06   | BV |
| 9      | 15.333         | DCM                  | 0.0000       | 2377175.50    | 169284.44   | VV |
| 10     | 16.083         | Freon113             | 0.0000       | 1906718.00    | 168229.02   | VB |
| 11     | 17.833         | trans-1,1-DCE        | 0.0000       | 1554289.88    | 221211.39   | BV |
| 12     | 18.342         | 1,1-DCA              | 0.0000       | 1895985.50    | 223901.21   | VB |
| 13     | 20.408         | cis-1,1-DCE          | 0.0000       | 75071.28      | 11499.78    | BB |
| 14     | 21.117         | Chloroform           | 0.0000       | 2276433.50    | 330181.78   | BB |
| 15     | 22.875         | 1,2-DCA              | 0.0000       | 1541063.50    | 238778.70   | BB |
| 16     | 23.508         | 1,1,1-TCA            | 0.0000       | 1954458.00    | 254228.56   | BB |
| 18     | 24.925         | Carbon Tetrachloride | 0.0000       | 1988845.50    | 266029.44   | BB |
| 20     | 26.433         | 1,2-DCP              | 0.0000       | 1924596.25    | 261881.93   | VB |
| 21     | 26.850         | BDCM                 | 0.0000       | 1462219.50    | 263515.16   | BV |
| 22     | 26.958         | TCE                  | 0.0000       | 2271491.50    | 341143.13   | VV |
| 24     | 28.150         | 2-CEVE               | 0.0000       | 129564.94     | 21575.30    | BV |
| 26     | 28.383         | cis-1,3-DCP          | 0.0000       | 1285114.13    | 204938.36   | BV |
| 28     | 30.058         | trans-1,3-DCP        | 0.0000       | 1053093.50    | 178972.02   | BB |
| 29     | 30.508         | 1,1,2-TCA            | 0.0000       | 1536313.00    | 242121.05   | BB |
| 31     | 32.217         | DBCM                 | 0.0000       | 1331663.50    | 192795.30   | BB |
| 33     | 33.925         | PCE                  | 0.0000       | 2083277.00    | 326035.44   | BB |
| 35     | 35.583         | ClBenzene            | 0.0000       | 1563633.63    | 257300.56   | BB |
| 36     | 36.300         | 1-C-2-FBenzeneD      | 0.0000       | 2331341.50    | 466033.22   | BB |

1ST DAY  
 10pt. std.

ELCD #1

Sample Name : 601/602 20ppb Time : 11/5/90 1:31 PM  
 Sample Number: 2 Study :  
 Operator :

Interface # : 1 Channel : B A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/2/90 12:33 PM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

Raw Data File : C:\2700\DATA1\KED\_002.raw  
 Result File : C:\2700\DATA1\KED\_002.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\601602.prc  
 Sample File : c:\2700\data\601602.smp  
 Sequence File : C:\2700\DATA\CD601602.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

## 601/602 REPORT

| Peak # | Ret Time [min] | Component Name       | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|----------------------|--------------|---------------|-------------|----|
| 1      | 7.592          | Freon12              | 0.0000       | 32057.75      | 3756.39     | BB |
| 2      | 8.142          | ClMethane            | 0.0000       | 497251.75     | 44650.85    | BB |
| 3      | 8.783          | Vinyl Chloride       | 0.0000       | 458449.78     | 55115.72    | BV |
| 4      | 9.183          | peak5                | 0.0000       | 55877.25      | 4546.85     | VB |
| 5      | 10.217         | BrMethane            | 0.0000       | 889898.25     | 58652.38    | BV |
| 6      | 10.792         | ClEthane             | 0.0000       | 1678681.50    | 93709.86    | VB |
| 7      | 13.217         | Freon11              | 0.0000       | 1132893.75    | 66219.48    | BB |
| 8      | 15.033         | 1,1-DCE              | 0.0000       | 1529183.75    | 182864.70   | BV |
| 9      | 15.342         | DCM                  | 0.0000       | 3794582.00    | 273953.38   | VV |
| 10     | 16.092         | Freon113             | 0.0000       | 3420807.25    | 296329.28   | VB |
| 11     | 17.842         | trans-1,1-DCE        | 0.0000       | 2534788.50    | 351634.16   | BV |
| 12     | 18.350         | 1,1-DCA              | 0.0000       | 2861803.00    | 385287.06   | VB |
| 13     | 20.417         | cis-1,1-DCE          | 0.0000       | 149461.75     | 22400.00    | BB |
| 14     | 21.117         | Chloroform           | 0.0000       | 3863590.25    | 550731.31   | BB |
| 15     | 22.875         | 1,2-DCA              | 0.0000       | 2628884.50    | 399849.31   | BB |
| 16     | 23.508         | 1,1,1-TCA            | 0.0000       | 3325667.75    | 429727.88   | BB |
| 18     | 24.925         | Carbon Tetrachloride | 0.0000       | 3532217.00    | 467094.78   | BB |
| 20     | 26.433         | 1,2-DCP              | 0.0000       | 3152212.25    | 428874.69   | VB |
| 21     | 26.858         | BDCM                 | 0.0000       | 2653318.50    | 466424.44   | BV |
| 22     | 26.958         | TCE                  | 0.0000       | 3716683.50    | 547845.38   | VE |
| 24     | 28.150         | 2-CEVE               | 0.0000       | 262888.66     | 43855.41    | BV |
| 26     | 28.883         | cis-1,3-DCP          | 0.0000       | 2277189.50    | 359902.50   | BV |
| 28     | 30.067         | trans-1,3-DCP        | 0.0000       | 1879653.75    | 314994.19   | BB |
| 29     | 30.517         | 1,1,2-TCA            | 0.0000       | 2646118.50    | 414921.16   | BB |
| 31     | 32.225         | DBCM                 | 0.0000       | 2451830.00    | 344860.34   | BB |
| 33     | 33.933         | PCE                  | 0.0000       | 3642847.25    | 551715.50   | BE |
| 36     | 35.592         | ClBenzene            | 0.0000       | 2782968.00    | 450777.00   | BB |
| 37     | 36.308         | 1-C-2-FBenzeneD      | 0.0000       | 2897846.50    | 466605.50   | BB |

1ST DAY  
 20pt. Std.

ELCD#1

Sample Name : 601/602 50ppb Time : 11/5/90 1:29 PM  
 Sample Number: 1 Study :  
 Operator :

Interface # : 1 Channel : B A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/2/90 11:31 AM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

Raw Data File : C:\2700\DATA1\K2D\_001.raw  
 Result File : C:\2700\DATA1\K2D\_001.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\DE01602.prc  
 Sample File : c:\2700\data\DE01602.smp  
 Sequence File : C:\2700\DATA\CD601602.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

## 601/602 REPORT

| Peak # | Ret Time [min] | Component Name       | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|----------------------|--------------|---------------|-------------|----|
| 2      | 7.642          | Freon12              | 0.0000       | 440441.63     | 36679.18    | BV |
| 3      | 8.233          | ClMethane            | 0.0000       | 2586419.00    | 214532.69   | VB |
| 4      | 8.850          | Vinyl Chloride       | 0.0000       | 2088827.25    | 219016.63   | BV |
| 5      | 9.300          | peak5                | 0.0000       | 761059.63     | 36499.19    | VB |
| 6      | 10.300         | BrMethane            | 0.0000       | 2851273.50    | 183723.61   | BV |
| 7      | 10.867         | ClEthane             | 0.0000       | 5866765.00    | 259944.27   | VE |
| 9      | 13.292         | Freon11              | 0.0000       | 4554894.00    | 183638.92   | BV |
| 10     | 15.108         | 1,1-DCE              | 0.0000       | 4254298.00    | 462460.97   | VV |
| 11     | 15.417         | DCM                  | 0.0000       | 9030124.00    | 596795.19   | VV |
| 12     | 16.158         | Freon113             | 0.0000       | 7365371.00    | 625226.94   | VB |
| 13     | 17.908         | trans-1,1-DCE        | 0.0000       | 5925328.00    | 809173.00   | BV |
| 14     | 18.417         | 1,1-DCA              | 0.0000       | 6259248.50    | 807315.94   | VB |
| 15     | 20.483         | cis-1,1-DCE          | 0.0000       | 358517.13     | 52092.03    | BV |
| 16     | 21.192         | Chloroform           | 0.0000       | 7565412.50    | 923744.19   | VB |
| 17     | 22.942         | 1,2-DCA              | 0.0000       | 5534761.50    | 827692.00   | BB |
| 18     | 23.575         | 1,1,1-TCA            | 0.0000       | 6885874.50    | 857839.75   | BB |
| 21     | 25.008         | Carbon Tetrachloride | 0.0000       | 7409907.50    | 914398.63   | BB |
| 23     | 26.503         | 1,2-DCP              | 0.0000       | 6132515.50    | 856304.31   | VB |
| 24     | 26.933         | BDCM                 | 0.0000       | 5481600.00    | 903783.44   | BV |
| 25     | 27.042         | TCE                  | 0.0000       | 7042849.50    | 922057.00   | VE |
| 28     | 28.225         | 2-CEVE               | 0.0000       | 346804.50     | 58014.47    | VV |
| 30     | 28.987         | cis-1,3-DCP          | 0.0000       | 4410972.50    | 631990.31   | BB |
| 32     | 30.142         | trans-1,3-DCP        | 0.0000       | 3380310.00    | 558278.33   | BB |
| 33     | 30.600         | 1,1,2-TCA            | 0.0000       | 5378247.00    | 832074.00   | BB |
| 35     | 32.300         | BDCM                 | 0.0000       | 5278203.50    | 727067.25   | BV |
| 37     | 34.025         | PCE                  | 0.0000       | 7323153.00    | 934389.75   | BB |
| 39     | 35.683         | ClBenzene            | 0.0000       | 5867072.00    | 911420.50   | BB |
| 40     | 36.392         | 1-C-2-FBenzeneD      | 0.0000       | 2941536.00    | 473229.44   | BV |

1ST DAY  
 50pt.  
 std.

ELCD#1

Sample Name : 601 50ppb Time : 11/5/90 5:30 PM  
 Sample Number: 1 Study :  
 Operator :

Interface # : 1 Channel : E A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/5/90 4:33 PM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

Raw Data File : C:\2700\DATA1\K5D\_001.raw  
 Result File : C:\2700\DATA1\K5D\_001.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\D601602.prc  
 Sample File : c:\2700\data\D601602.smp  
 Sequence File : C:\2700\DATA\SEQUCK5.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

*1ST DAY*  
*2ND DAY*  
*50pt.*

# 601/602 REPORT

| Peak # | Ret Time [min] | Component Name       | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|----------------------|--------------|---------------|-------------|----|
| 1      | 7.625          | Freon12              | 0.0000       | 21295.48      | 3167.36     | BB |
| 2      | 8.150          | ClMethane            | 0.0000       | 281912.00     | 32236.03    | BB |
| 3      | 8.900          | Vinyl Chloride       | 0.0000       | 260632.50     | 23976.51    | BB |
| 4      | 10.283         | BrMethane            | 0.0000       | 216794.89     | 18252.75    | BV |
| 5      | 10.842         | ClEthane             | 0.0000       | 316662.91     | 29705.78    | VB |
| 6      | 13.208         | Freon11              | 0.0000       | 493934.50     | 60028.79    | BB |
| 7      | 15.025         | 1,1-DCE              | 0.0000       | 632343.38     | 87318.78    | BV |
| 8      | 15.333         | DCM                  | 0.0000       | 864489.63     | 86346.31    | VV |
| 9      | 16.092         | Freon113             | 0.0000       | 622353.50     | 62732.06    | VB |
| 10     | 17.333         | trans-1,1-DCE        | 0.0000       | 648166.56     | 28792.99    | BV |
| 11     | 18.342         | 1,1-DCA              | 0.0000       | 700103.63     | 92637.02    | VB |
| 12     | 20.408         | cis-1,1-DCE          | 0.0000       | 23773.77      | 3628.42     | BB |
| 13     | 21.082         | Chloroform           | 0.0000       | 923637.50     | 130533.03   | BB |
| 14     | 22.850         | 1,2-DCA              | 0.0000       | 639224.19     | 97815.26    | BB |
| 15     | 23.492         | 1,1,1-TCA            | 0.0000       | 704054.00     | 82538.85    | BB |
| 16     | 24.908         | Carbon Tetrachloride | 0.0000       | 733168.44     | 96890.98    | BB |
| 17     | 26.408         | 1,2-DCP              | 0.0000       | 674827.19     | 96676.16    | BV |
| 18     | 26.333         | EDCM                 | 0.0000       | 555312.50     | 104333.66   | VV |
| 19     | 26.933         | TCE                  | 0.0000       | 1067663.75    | 149003.06   | VE |
| 21     | 28.367         | cis-1,3-DCP          | 0.0000       | 370427.94     | 54719.96    | BV |
| 23     | 30.050         | trans-1,3-DCP        | 0.0000       | 225890.56     | 32769.74    | BV |
| 24     | 30.500         | 1,1,2-TCA            | 0.0000       | 676174.88     | 101874.00   | VB |
| 25     | 32.217         | DBCM                 | 0.0000       | 579192.19     | 75023.31    | BB |
| 26     | 33.925         | PCE                  | 0.0000       | 1003925.00    | 148325.94   | BB |
| 28     | 35.592         | ClBenzene            | 0.0000       | 386012.94     | 60133.54    | BB |
| 29     | 36.308         | 1-C-2-FluorobenzeneD | 0.0000       | 313193.50     | 48780.79    | BB |
| 30     | 37.208         | Bromoform            | 0.0000       | 277940.44     | 33910.58    | BB |
| 31     | 38.108         | 1,1,2,2-TCA          | 0.0000       | 477512.00     | 71538.79    | BB |

ELCD #1

Sample Name : 601/602 05ppb  
 Sample Number : 2  
 Operator :  
 Time : 11/5/90 6:32 PM  
 Study :

Interface # : 1 Channel : B A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/5/90 5:35 PM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

2nd  
 1st DAY  
 5pt

Raw Data File : C:\2700\DATA1\K5D\_002.raw  
 Result File : C:\2700\DATA1\K5D\_002.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\D601602.prc  
 Sample File : c:\2700\data\D601602.smp  
 Sequence File : C:\2700\DATA1\SEQCDK5.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

# 601/602 REPORT

| Peak # | Ret Time [min] | Component Name       | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|----------------------|--------------|---------------|-------------|----|
| 1      | 7.617          | Freon12              | 0.0000       | 11076.98      | 1271.45     | BB |
| 2      | 8.175          | ClMethane            | 0.0000       | 111539.00     | 16522.46    | BB |
| 3      | 8.808          | Vinyl Chloride       | 0.0000       | 72343.31      | 15119.48    | BB |
| 4      | 9.185          | peak5                | 0.0000       | 39775.80      | -0.02       | BB |
| 6      | 10.250         | BrMethane            | 0.0000       | 366327.06     | 23180.62    | BV |
| 7      | 10.825         | ClEthane             | 0.0000       | 527996.38     | 32742.00    | VB |
| 9      | 13.233         | Freon11              | 0.0000       | 385377.47     | 27768.70    | BB |
| 10     | 15.050         | 1,1-DCE              | 0.0000       | 566598.81     | 66800.53    | BV |
| 11     | 15.353         | DCM                  | 0.0000       | 1367655.38    | 98642.12    | VV |
| 12     | 16.100         | Freon113             | 0.0000       | 1051546.25    | 98665.35    | VB |
| 13     | 17.850         | trans-1,1-DCE        | 0.0000       | 868654.75     | 126395.70   | BV |
| 14     | 18.358         | 1,1-DCA              | 0.0000       | 951019.44     | 129069.56   | VB |
| 15     | 20.425         | cis-1,1-DCE          | 0.0000       | 40264.00      | 6181.58     | BB |
| 16     | 21.125         | Chloroform           | 0.0000       | 1347100.00    | 187385.80   | BB |
| 17     | 22.375         | 1,2-DCA              | 0.0000       | 888993.50     | 133481.92   | BB |
| 18     | 23.508         | 1,1,1-TCA            | 0.0000       | 1196035.00    | 154012.05   | BB |
| 20     | 24.933         | Carbon Tetrachloride | 0.0000       | 1125788.00    | 150086.94   | BB |
| 22     | 26.433         | 1,2-DCP              | 0.0000       | 906615.13     | 133662.86   | VB |
| 23     | 26.858         | BDCM                 | 0.0000       | 794807.50     | 139227.81   | BV |
| 24     | 26.958         | TCE                  | 0.0000       | 1247118.75    | 186316.14   | VV |
| 26     | 28.158         | 2-CEVE               | 0.0000       | 20892.11      | 3319.28     | BV |
| 28     | 28.883         | cis-1,3-DCP          | 0.0000       | 672711.38     | 105541.60   | BV |
| 30     | 30.058         | trans-1,3-DCP        | 0.0000       | 544462.31     | 88969.93    | BV |
| 31     | 30.517         | 1,1,2-TCA            | 0.0000       | 869244.63     | 134781.00   | VB |
| 32     | 32.217         | DBCM                 | 0.0000       | 636761.25     | 94853.93    | BB |
| 34     | 33.933         | PCE                  | 0.0000       | 1260450.00    | 190177.94   | BB |
| 36     | 35.592         | ClBenzene            | 0.0000       | 954790.00     | 152671.47   | BB |
| 37     | 36.308         | 1-C-2-FBenzeneD      | 0.0000       | 3045142.00    | 475292.34   | BB |

ELCD#1

Sample Name : 601/602 50PPB Time : 11/6/90 4:59 PM  
 Sample Number : 1 Study :  
 Operator : LRA

Interface # : 1 Channel : B A/D mV Range : 1000  
 AutoSampler : None attached  
 Rack/Vial : 0/0

Data Acquisition Time: 11/6/90 4:01 PM  
 Delay Time : 5.00 min.  
 End Time : 55.00 min.  
 Sampling Rate : 2.0000 pts/sec

3RD DAY  
 50pt. std.

Raw Data File : C:\2700\DATA1\K6D\_001.raw  
 Result File : C:\2700\DATA1\K6D\_001.rst  
 Instrument File: c:\2700\data\601602.ins  
 Process File : c:\2700\data\D601602.prc  
 Sample File : c:\2700\data\D601602.smp  
 Sequence File : C:\2700\DATA\SEQCDK6.seq

Inj. Volume : 1 ul Area Reject : 0.00  
 Sample Amount : 1.0000

# 601/602 REPORT

| Peak # | Ret Time [min] | Component Name       | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|----------------------|--------------|---------------|-------------|----|
| 2      | 7.567          | Freon12              | 0.0000       | 465824.50     | 36501.92    | BV |
| 3      | 8.193          | DiMethane            | 0.0000       | 2242375.50    | 195097.78   | VB |
| 4      | 8.767          | Vinyl Chloride       | 0.0000       | 2038231.00    | 203400.21   | BV |
| 5      | 9.200          | peak5                | 0.0000       | 651622.94     | 40009.34    | VB |
| 6      | 10.208         | BrMethane            | 0.0000       | 3024757.75    | 174323.09   | BV |
| 7      | 10.775         | ClEthane             | 0.0000       | 5750448.50    | 243812.00   | VE |
| 9      | 13.200         | Freon11              | 0.0000       | 4620276.00    | 200736.06   | BV |
| 10     | 15.025         | 1,1-DCE              | 0.0000       | 4150827.25    | 464001.84   | VV |
| 11     | 15.342         | DCM                  | 0.0000       | 3405954.00    | 549213.56   | VV |
| 12     | 16.083         | Freon113             | 0.0000       | 7396872.00    | 603580.88   | VB |
| 13     | 17.342         | trans-1,1-DCE        | 0.0000       | 5680781.50    | 778737.13   | BV |
| 14     | 18.358         | 1,1-DCA              | 0.0000       | 6111333.00    | 785251.33   | VB |
| 15     | 20.425         | cis-1,1-DCE          | 0.0000       | 387268.69     | 56413.34    | BV |
| 16     | 21.142         | Chloroform           | 0.0000       | 7334324.00    | 920445.00   | VB |
| 17     | 22.900         | 1,2-DCA              | 0.0000       | 5260165.00    | 796340.63   | BB |
| 18     | 23.533         | 1,1,1-TCA            | 0.0000       | 7071014.50    | 861718.13   | BV |
| 21     | 24.953         | Carbon Tetrachloride | 0.0000       | 7056521.00    | 899609.50   | BB |
| 23     | 26.467         | 1,2-DCP              | 0.0000       | 5556486.50    | 798961.50   | VB |
| 24     | 26.833         | BDCM                 | 0.0000       | 5533704.00    | 891623.06   | BV |
| 25     | 26.992         | TCE                  | 0.0000       | 6650512.50    | 923701.25   | VE |
| 29     | 28.133         | 2-CEVE               | 0.0000       | 120170.09     | 20752.51    | BV |
| 31     | 28.917         | cis-1,3-DCP          | 0.0000       | 4410157.50    | 691391.19   | BV |
| 33     | 30.100         | trans-1,3-DCP        | 0.0000       | 3598994.50    | 592527.06   | BB |
| 34     | 30.550         | 1,1,2-TCA            | 0.0000       | 5044013.50    | 775465.31   | BB |
| 36     | 32.253         | DDCM                 | 0.0000       | 5249349.00    | 708655.88   | BV |
| 38     | 33.333         | PCE                  | 0.0000       | 6911021.50    | 923733.25   | BE |
| 41     | 35.642         | ClBenzene            | 0.0000       | 5436706.00    | 878085.13   | BB |
| 42     | 36.353         | 1-C-2-FBenzeneD      | 0.0000       | 2340395.25    | 455293.50   | BB |

ELCD #1

Sample Name : 601/602 05ppb  
Sample Number: 2  
Operator : LRA

Time : 11/6/90 6:00 PM  
Study :

Interface # : 1 Channel : B A/D mV Range : 1000  
AutoSampler : None attached  
Rack/Vial : 0/0

Data Acquisition Time: 11/6/90 5:03 PM  
Delay Time : 5.00 min.  
End Time : 55.00 min.  
Sampling Rate : 2.0000 pts/sec

Raw Data File : C:\2700\DATA1\K6D\_002.raw  
Result File : C:\2700\DATA1\K6D\_002.rst  
Instrument File: c:\2700\data\601602.ins  
Process File : c:\2700\data\601602.prc  
Sample File : c:\2700\data\601602.smp  
Sequence File : C:\2700\DATA\SEDCCK6.seq

Inj. Volume : 1 ul Area Reject : 0.00  
Sample Amount : 1.0000

3RD DAY  
Spt. Std

# 601/602 REPORT

| Peak # | Ret Time [min] | Component Name       | Amount [ppb] | Area [uV-sec] | Height [uV] | BL |
|--------|----------------|----------------------|--------------|---------------|-------------|----|
| 1      | 7.700          | Freon12              | 0.0000       | 29896.73      | 3435.03     | BB |
| 2      | 8.250          | ClMethane            | 0.0000       | 410645.50     | 38020.44    | BB |
| 3      | 8.875          | Vinyl Chloride       | 0.0000       | 219920.88     | 28024.94    | BB |
| 4      | 9.217          | peak5                | 0.0000       | 71822.63      | 5433.90     | VB |
| 5      | 10.342         | BrMethane            | 0.0000       | 381452.00     | 23375.42    | BB |
| 6      | 10.900         | ClEthane             | 0.0000       | 492240.22     | 33747.70    | VB |
| 8      | 13.317         | Freon11              | 0.0000       | 416755.03     | 28192.11    | BB |
| 9      | 15.117         | 1,1-DCE              | 0.0000       | 585533.63     | 66277.37    | BB |
| 10     | 15.425         | DCM                  | 0.0000       | 1414635.75    | 99230.35    | VB |
| 11     | 16.167         | Freon113             | 0.0000       | 1092806.13    | 103947.95   | VB |
| 12     | 17.908         | trans-1,1-DCE        | 0.0000       | 847350.13     | 121603.04   | BB |
| 13     | 18.417         | 1,1-DCA              | 0.0000       | 912829.69     | 124580.57   | VB |
| 14     | 20.475         | cis-1,1-DCE          | 0.0000       | 41828.75      | 6377.95     | BB |
| 15     | 21.175         | Chloroform           | 0.0000       | 1221620.00    | 179401.78   | BB |
| 16     | 22.925         | 1,2-DCA              | 0.0000       | 820542.75     | 128753.27   | BB |
| 17     | 23.558         | 1,1,1-TCA            | 0.0000       | 1310385.00    | 171891.03   | BB |
| 19     | 24.975         | Carbon Tetrachloride | 0.0000       | 937940.69     | 128723.49   | BB |
| 21     | 26.475         | 1,2-DCP              | 0.0000       | 856732.13     | 127632.70   | VB |
| 22     | 26.892         | BDCM                 | 0.0000       | 714628.81     | 130725.52   | BB |
| 23     | 27.000         | TCE                  | 0.0000       | 1211571.00    | 179220.67   | VB |
| 25     | 28.192         | 2-DEVE               | 0.0000       | 11893.09      | 1966.75     | BB |
| 27     | 28.917         | cis-1,3-DCP          | 0.0000       | 492109.44     | 80726.30    | BB |
| 29     | 30.092         | trans-1,3-DCP        | 0.0000       | 275335.22     | 45476.11    | BB |
| 30     | 30.550         | 1,1,2-TCA            | 0.0000       | 932450.50     | 131056.22   | VB |
| 32     | 32.250         | BDCM                 | 0.0000       | 634269.13     | 88924.20    | BB |
| 34     | 33.958         | PCE                  | 0.0000       | 1208742.00    | 187036.31   | BB |
| 36     | 35.617         | ClBenzene            | 0.0000       | 917730.25     | 150444.00   | BB |
| 37     | 36.333         | 1-C-2-FBenzeneD      | 0.0000       | 2865284.00    | 462135.44   | BB |

document F

HAZARDOUS SUBSTANCE AND TANK LIST

Page 1 of 2 pages

| (A)<br>Chem. Name<br>& Trade Name | (B)<br>DOT<br>CLASS | (C)<br>Chem. Abstr.<br>Service No. | (D)<br>How<br>Stored | (E)<br>Tot. Est. Quant.<br>Used Per Year | (F)<br>Max. Quant.<br>Any One Time | (G)<br>Location<br>on Premises | (H)<br>How<br>Used                    |
|-----------------------------------|---------------------|------------------------------------|----------------------|------------------------------------------|------------------------------------|--------------------------------|---------------------------------------|
| 1. Ruby 75A<br>Thread Rolling Oil | 64742-88-7          |                                    | Barrel 55G           | 10                                       | 2                                  | Outside<br>containment area    | Fillet Roll<br>Thread rolling machine |
| 2. Protac 1000<br>Oil Machine     | not available       |                                    | Barrel 55G           | 8                                        | 1                                  | "                              | Cold headers                          |
| 3. Drawsol RH-69<br>Petroleum Oil | 64742-57-0          |                                    | Barrel 55G           | 1                                        | 1                                  | "                              | Trimmers                              |
| 4. Ardrex Base Oil<br>Oil         | HF                  |                                    | Barrel 55G           | 2                                        | 1                                  | "                              | NDT                                   |
| 5. Sapphire Titanium Oil<br>Oil   | 63449-39-8          |                                    | Barrel 55G           | 1                                        | 1                                  | "                              | Grinding                              |
| 6. Deolene #13M<br>Grinding Oil   | 63449-39-8          |                                    | Barrel 55G           | 39                                       | 3                                  | "                              | Grinding                              |
| 7. Fulsul 364G<br>Cutting Oil     | 63449-39-8          |                                    | Barrel 55G           | 2                                        | 1                                  | "                              | Traubs                                |
| 8. Deolube 300 4W<br>Spindle Oil  | none                |                                    | Barrel 55G           | 11                                       | 1                                  | "                              | Grinding                              |

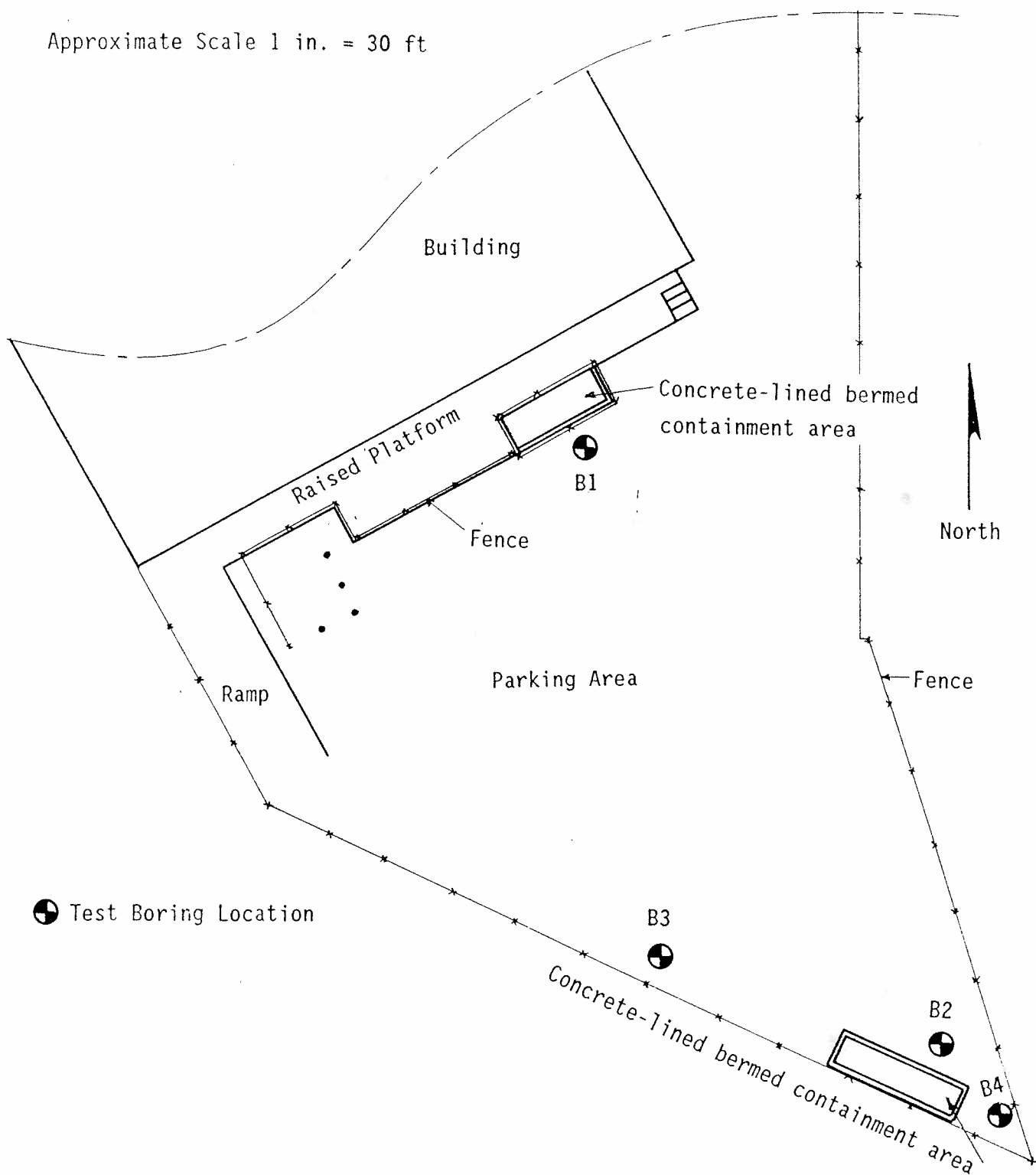
46235

## HAZARDOUS SUBSTANCE AND TANK LIST

Page 2 of 2 pages

| (A)<br>Chem. Name<br>& Trade Name | (B)<br>DOT<br>CLASS | (C)<br>Chem. Abstr.<br>Service No. | (D)<br>How<br>Stored | (E)<br>Tot. Est. Quant.<br>Used Per Year | (F)<br>Max. Quant.<br>Any One Time | (G)<br>Location<br>on Premises | (H)<br>How<br>Used                      |
|-----------------------------------|---------------------|------------------------------------|----------------------|------------------------------------------|------------------------------------|--------------------------------|-----------------------------------------|
| 1. Deosol #202                    | nct available       |                                    | Barrel 55G           | 1                                        | 1                                  | Outside<br>Containment area    | Lathes                                  |
| Oil Soluble                       |                     |                                    |                      |                                          |                                    |                                |                                         |
| 2. Thinner 350B                   | 64742-47-8          |                                    | Barrel 55G           | 51                                       | 3                                  | "                              | Wash, Hot heading<br>Grinding<br>Traubs |
| Solvent                           |                     |                                    |                      |                                          |                                    |                                |                                         |
| 3. Triethene                      | 646-06-0            |                                    | Barrel 55G           | 18                                       | 1 to 2                             | "                              | NDT                                     |
| Solvent                           |                     |                                    |                      |                                          |                                    |                                |                                         |
| 4.                                |                     |                                    |                      |                                          |                                    |                                |                                         |
| 5.                                |                     |                                    |                      |                                          |                                    |                                |                                         |
| 6.                                |                     |                                    |                      |                                          |                                    |                                |                                         |
| 7.                                |                     |                                    |                      |                                          |                                    |                                |                                         |
| 8.                                |                     |                                    |                      |                                          |                                    |                                |                                         |

Approximate Scale 1 in. = 30 ft



TEST BORING LOCATIONS  
MERCURY AEROSPACE FASTENERS  
NORTH HOLLYWOOD, CALIFORNIA

Document (G)



GEOSYNTEC CONSULTANTS

|              |        |
|--------------|--------|
| FIGURE NO.   | 4-1    |
| PROJECT NO.  | P1590  |
| DOCUMENT NO. | C90052 |
| PAGE NO.     |        |

Print or type. (Form designed for use on elite (12-pitch typewriter).

UNIFORM HAZARDOUS  
WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest  
Document No.2. Page 1  
of 1Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

A. State Manifest Document Number

SEP 17 1987

87327544

4. Generator's Phone (page)

B. State Generator's ID

5. Transporter 1 Company Name

6. US EPA ID Number

C. State Transporter's ID

7. Transporter 2 Company Name

8. US EPA ID Number

D. Transporter's Phone

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

13. Total  
Quantity14. Unit  
Wt/Vol

I. Waste No.

a.

No.

Type

State

b.

State

c.

State

d.

State

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16.

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

MERCURY AEROSPACE

11600 Sherman Way  
No. Hollywood, Ca 91609

A. State Manifest Document Number

87343021

B. State Generator's ID

SR AC 131767011

4. Generator's Phone (818) 982-4800

5. Transporter 1 Company Name

Amberwick Corporation

6. US EPA ID Number

CAD980892111

C. State Transporter's ID

711021

D. Transporter's Phone

213/426-6503

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

Casmalia Resources  
N.T.U. Road  
Casmalia, Ca. Mercury Aerospace

10. US EPA ID Number

CAD020748125

G. State Facility's ID

CAD020748125

H. Facility's Phone

805/937-8449

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers  
No. Type

13. Total Quantity

14. Unit  
Wt/Vol

15. Waste No.

a.

Hazardous Waste Solid (NOS) NA9189

109 DM

14050 PD

State

491

EPA/Other  
D-0001

b.

State

EPA/Other

c.

State

EPA/Other

d.

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

Oil, Sludge & Absorbant

K. Handling Codes for Wastes Listed Above

a.

03

c.

d.

15. Special Handling Instructions and Additional Information

16.

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

EDWARD F. EARLE

Signature

*Edward F. Earle*

Month Day Year

11/1/87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

ROBERT MOORE

Signature

*Robert Moore*

Month Day Year

11/1/87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

CASMALIA RESOURCES #96758

Signature

*Chie Brown*

Month Day Year

1/10/87

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-GEN-ERATOR

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **CAD981413131** Manifest Document No. **1**

2. Page **1** of **1** Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address **Mercury Aerospace Inc 11800 Sherman Way**

A. State Manifest Document Number **87412668**

4. Generator's Phone **818 982-4800**

B. State Generator's ID **CAD981413131**

5. Transporter 1 Company Name **CALIF WASTE OIL Mgmt**

C. State Transporter's ID **80382**

7. Transporter 2 Company Name

D. Transporter's Phone

9. Designated Facility Name and Site Address **Rutherford Pacific 16604 S San Pedro CA 90731**

E. State Transporter's ID

10. US EPA ID Number **CAD981161128**

F. Transporter's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

G. State Facility's ID

a. **WASTE WATER AND OIL NOS**

12. Containers No. **1** Type **DRUM**

b. **COMBUSTIBLE LIQUID NA1270**

13. Total Quantity **4906**

c. **RECEIVED DEC 30 1987**

14. Unit **WT/VOL**

d. **Mercury Aerospace**

15. Special Handling Instructions and Additional Information

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

17. Transporter 1 Acknowledgement of Receipt of Materials

18. Transporter 2 Acknowledgement of Receipt of Materials

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **RON WATT**

Signature **[Signature]** Month Day Year **11/21/87**

Printed/Typed Name **[Signature]**

Signature **[Signature]** Month Day Year **11/21/87**

Printed/Typed Name

Signature

Printed/Typed Name

Signature

Printed/Typed Name

Signature

Printed/Typed Name

Signature

Printed/Typed Name

Signature

Printed/Typed Name

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Signature

**UNIFORM HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

QAY000083613

Manifest  
Document No.

0010011

2. Page 1  
of 1Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

Mercury Aerospace  
11800 Sherman Way, No. Hollywood, CA. 91609

4. Generator's Phone (818) 982-4800

A. State Manifest Document Number

87340378

B. State Generator's ID

SR AC 13 767011

5. Transporter 1 Company Name

Amberwick Corporation

6. US EPA ID Number

CAD980862111

C. State Transporter's ID

808467

D. Transporter's Phone

(213) 426-6503

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

Casmalia Resources  
N.T.U. Road  
Casmalia, Ca.

10. US EPA ID Number

CAD020743125

G. State Facility's ID

CAD020743125

H. Facility's Phone

(805) 937-8449

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers  
No. Type13. Total  
Quantity14. Unit  
Wt/Vol

1. Waste No.

a.

NA9139  
Hazardous Waste Solid (NOS) ORM-E

219 DM 0855 PD

State

SIX491

EPA/Other

D-0001

b.

**GENERATOR CERTIFICATION**

State

EPA/Other

c.

State

EPA/Other

d.

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

Oil, Sludge, Absorbent

03

15. Special Handling Instructions and Additional Information

16.

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

Please print or type. (Form designed for use on elite (12-pitch typewriter).

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                    |  |                                                      |                    |                                                                 |                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------|--------------------|-----------------------------------------------------------------|-----------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 1. Generator's US EPA ID No.<br><b>CAD98114131311</b>                                                                              |  | Manifest Document No.                                | 2. Page 1 of 1     | Information in the shaded areas is not required by Federal law. |                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | 3. Generator's Name and Mailing Address<br><b>MERCURY AEROSPACE FASTENERS INC<br/>11800 SHERMAN WAY. NORTH HOLLYWOOD, CA 91605</b> |  | A. State Manifest Document Number<br><b>87544968</b> |                    | B. State Generator's ID<br><b>CAD98114131311</b>                |                       |
| 4. Generator's Phone (818) <b>982 4800</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | 5. Transporter 1 Company Name<br><b>CALIFORNIA WASTE OIL MANAGEMENT</b>                                                            |  | 6. US EPA ID Number<br><b>CAD9811696420</b>          |                    | C. State Transporter's ID                                       |                       |
| 7. Transporter 2 Company Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | 8. US EPA ID Number                                                                                                                |  | D. Transporter's Phone                               |                    | E. State Transporter's ID                                       |                       |
| 9. Designated Facility Name and Site Address<br><b>RUTHERFORD PACIFIC<br/>16604 S. SAN PEDRO<br/>CARSON, CA 90746</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | 10. US EPA ID Number<br><b>CAD981161128</b>                                                                                        |  | G. State Facility's ID                               |                    | H. Facility's Phone                                             |                       |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                    |  | 12. Containers                                       | 13. Total Quantity | 14. Unit Wt/Vol                                                 | I. Waste No.          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                    |  | No.                                                  | Type               |                                                                 |                       |
| a. <b>MIXED WASTE OILS AND WATER N.O.S.<br/>COMBUSTIBLE LIQUID NA 1270</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                    |  | 1                                                    | 91 TT              | 1400 G                                                          | State <b>221</b>      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                    |  |                                                      |                    |                                                                 | EPA/Other <b>DO01</b> |
| b.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                    |  |                                                      |                    |                                                                 | State                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                    |  |                                                      |                    |                                                                 | EPA/Other             |
| c.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                    |  |                                                      |                    |                                                                 | State                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                    |  |                                                      |                    |                                                                 | EPA/Other             |
| d.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                    |  |                                                      |                    |                                                                 | State                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                    |  |                                                      |                    |                                                                 | EPA/Other             |
| J. Additional Descriptions for Materials Listed Above<br><b>RECYCLABLE OIL (+ WATER)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                    |  | K. Handling Codes for Wastes Listed Above            |                    |                                                                 |                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                    |  | a. <b>14</b>                                         |                    | b.                                                              |                       |
| 15. Special Handling Instructions and Additional Information<br><b>GLOVES</b> <span style="float: right;"><b>87544892 3</b></span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                    |  |                                                      |                    |                                                                 |                       |
| 16. <b>GENERATOR'S CERTIFICATION:</b> I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.<br>If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. |  |                                                                                                                                    |  |                                                      |                    |                                                                 |                       |
| Printed/Typed Name<br><b>JAMES I. COLE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                    |  | Signature<br><i>James I. Cole</i>                    |                    | Month Day Year<br><b>10 8 11 1988</b>                           |                       |
| 17. Transporter 1 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                    |  |                                                      |                    |                                                                 |                       |
| Printed/Typed Name<br><i>Louise Madrigal</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                    |  | Signature<br><i>Louise Madrigal</i>                  |                    | Month Day Year<br><b>12 8 11 1988</b>                           |                       |
| 18. Transporter 2 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                    |  |                                                      |                    |                                                                 |                       |
| Printed/Typed Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                    |  | Signature                                            |                    | Month Day Year                                                  |                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                    |  |                                                      |                    | <b>RECEIVED</b>                                                 |                       |
| 19. Discrepancy Indication Space                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                    |  | <b>10 16 1988</b><br><b>Mercury Aerospace</b>        |                    |                                                                 |                       |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                    |  |                                                      |                    |                                                                 |                       |
| Printed/Typed Name<br><b>WILLIE WALKER</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                    |  | Signature<br><i>Willie Walker</i>                    |                    | Month Day Year<br><b>9 8 11 1988</b>                            |                       |

Instructions on the Back

| UNIFORM HAZARDOUS WASTE MANIFEST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 1. Generator's US EPA ID No.                                          | Manifest Document No. | 2. Page 1 of 1                                       | Information in the shaded areas is not required by Federal law. |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------|-----------------------|------------------------------------------------------|-----------------------------------------------------------------|
| 3. Generator's Name and Mailing Address<br><b>MERCURY AEROSPACE</b><br><b>11800 SHERMAN WAY M. HOLLYWOOD, CA. 91609</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 4. Generator's Phone (213) 982-4800                                   |                       | A. State Manifest Document Number<br><b>88087011</b> |                                                                 |
| 5. Transporter 1 Company Name<br><b>NORWALK DRUM</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 8. US EPA ID Number<br><b>CAD981422140</b>                            |                       | C. State Transporter's ID<br><b>906610</b>           |                                                                 |
| 7. Transporter 2 Company Name<br><b>NORWALK DRUM</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 8. US EPA ID Number<br><b>CAD981422140</b>                            |                       | D. Transporter's Phone<br><b>213/921-5171</b>        |                                                                 |
| 9. Designated Facility Name and Site Address<br><b>CASHALIA RESOURCES</b><br><b>WTU RD.</b><br><b>CASHALIA, CA. 93429</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | 10. US EPA ID Number<br><b>CAD020748125</b>                           |                       | E. State Transporter's ID<br><b>906611</b>           |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                       |                       | F. Transporter's Phone<br><b>213/921-5171</b>        |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                       |                       | G. State Facility's ID<br><b>CAD020748125</b>        |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                       |                       | H. Facility's Phone<br><b>805/937-8449</b>           |                                                                 |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 12. Containers<br>No. Type                                            |                       | 13. Total Quantity<br>Unit Wt/Vol                    |                                                                 |
| a. <b>hazardous waste solid NOS ORM E NA 9189</b><br><b>CA. reg. waste (waste oils)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 22 DM 17600                                                           |                       | State 221<br>EPA/Other CA. ONLY                      |                                                                 |
| b.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                       |                       | State<br>EPA/Other                                   |                                                                 |
| c.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                       |                       | State<br>EPA/Other                                   |                                                                 |
| d.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                       |                       | State<br>EPA/Other                                   |                                                                 |
| J. Additional Descriptions for Materials Listed Above<br><b>A. waste oils and mixed oils solidified with sawdust</b><br><b>solid &amp; dry. see attached analysis.</b><br><b>QUICK-SORB ALSO USED AS AN</b><br><b>ABSORBENT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | K. Handling Codes for Wastes Listed Above<br>a. <b>03</b><br>c.<br>d. |                       | b.<br>d.                                             |                                                                 |
| 15. Special Handling Instructions and Additional Information<br><b>gloves &amp; goggles.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | RECEIVED<br>1988<br>Mercury Aerospace                                 |                       |                                                      |                                                                 |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.<br>If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. |  |                                                                       |                       |                                                      |                                                                 |
| Printed/Typed Name<br><b>JAMES COLE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | Signature<br><i>[Signature]</i>                                       |                       | Month Day Year<br><b>09 27 98</b>                    |                                                                 |
| 17. Transporter 1 Acknowledgement of Receipt of Materials<br>Printed/Typed Name<br>Signature<br>Month Day Year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                       |                       |                                                      |                                                                 |
| 18. Transporter 2 Acknowledgement of Receipt of Materials<br>Printed/Typed Name<br>Signature<br>Month Day Year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                       |                       |                                                      |                                                                 |
| 19. Discrepancy Indication Space                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                       |                       |                                                      |                                                                 |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.<br>Printed/Typed Name<br><b>CASHALIA RESOURCES 10/21/2</b><br>Signature<br><i>[Signature]</i><br>Month Day Year<br><b>10 21 98</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                       |                       |                                                      |                                                                 |

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

Please print or type. (Form designed for use on elite (12-pitch typewriter).

| UNIFORM HAZARDOUS WASTE MANIFEST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | 1. Generator's US EPA ID No.              | Manifest Document No. | 2. Page 1 of                                         | Information in the shaded areas is not required by Federal law. |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------|-----------------------|------------------------------------------------------|-----------------------------------------------------------------|
| 3. Generator's Name and Mailing Address<br><b>MERCURY AEROSPACE FASTENERS, INC</b><br><b>11800 SHERMAN WAY, NORTH HOLLYWOOD, CA 91605</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | CAD981413131                              |                       | A. State Manifest Document Number<br><b>88059601</b> |                                                                 |
| 4. Generator's Phone (818) 982 4800                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | 6. US EPA ID Number<br>CAD981423320       |                       | B. State Generator's ID<br>CAD981413131              |                                                                 |
| 5. Transporter 1 Company Name<br><b>KING AND KING, DRAIN OIL SERVICE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 6. US EPA ID Number                       |                       | C. State Transporter's ID<br>34200                   |                                                                 |
| 7. Transporter 2 Company Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | 6. US EPA ID Number                       |                       | D. Transporter's Phone<br>213-439-2500               |                                                                 |
| 9. Designated Facility Name and Site Address<br><b>P.R.I. 1835 E. 29TH ST.</b><br><b>SIGNAL HILL CA.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 10. US EPA ID Number<br>CAT080011059      |                       | E. State Transporter's ID                            |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                           |                       | F. Transporter's Phone                               |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                           |                       | G. State Facility's ID<br>CAT080011059               |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                           |                       | H. Facility's Phone<br>213-595-6597                  |                                                                 |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 12. Containers No.                        | 13. Total Quantity    | 14. Unit Wt/Vol                                      | I. Waste No.                                                    |
| a. MIXED WASTE OILS AND WATER N.O.S.<br>COMBUSTIBLE LIQUID NA 1270                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | 01 TT                                     | 300 G                 |                                                      | State 221<br>EPA/Other 0001                                     |
| b.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                           |                       |                                                      | State                                                           |
| c.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                           |                       |                                                      | EPA/Other                                                       |
| d.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                           |                       |                                                      | State                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                           |                       |                                                      | EPA/Other                                                       |
| J. Additional Descriptions for Materials Listed Above<br>RECYCLABLE OIL (+ WATER)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | K. Handling Codes for Wastes Listed Above |                       |                                                      |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | a. RO1                                    |                       | b.                                                   |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | c.                                        |                       | d.                                                   |                                                                 |
| 15. Special Handling Instructions and Additional Information<br>GLOVES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                           |                       |                                                      |                                                                 |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.<br><br>If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. |  |                                           |                       |                                                      |                                                                 |
| Printed/Typed Name<br>JAMES I. COLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | Signature<br>                             |                       | Month Day Year<br>09 30 88                           |                                                                 |
| 17. Transporter 1 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                           |                       |                                                      |                                                                 |
| Printed/Typed Name<br>KENNETH T. KING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | Signature<br>                             |                       | Month Day Year<br>10 30 88                           |                                                                 |
| 18. Transporter 2 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                           |                       |                                                      |                                                                 |
| Printed/Typed Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | Signature                                 |                       | Month Day Year                                       |                                                                 |
| 19. Discrepancy Indication Space                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                           |                       |                                                      |                                                                 |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                           |                       |                                                      |                                                                 |
| Printed/Typed Name<br>DAVID PLATT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | Signature<br>                             |                       | Month Day Year<br>10 04 88                           |                                                                 |

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

### Instructions on the Back

## UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

CA D 9 8 1 1 4 1 3 1 3 1

Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

MERCURY AEROSPACE FASTENERS, INC.  
11800 SHERMAN WAY, NO. HOLLYWOOD, CA 91605

4. Generator's Phone (818) 982 4800

5. Transporter 1 Company Name  
KING AND KING DRAIN OIL SERVICE

6. US EPA ID Number

CA D 9 8 1 1 4 2 3 3 2 0

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

P.R.I. 1835 E. 24TH ST  
SIGNAL HILL CA 90806

10. US EPA ID Number

CA T 0 8 0 0 1 1 0 5 9

A. State Manifest Document Number

88059602

B. State Generator's ID

CA D 9 8 1 1 4 1 3 1 3 1

C. State Transporter's ID

54200

D. Transporter's Phone (213) 439 8500

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

CA T 0 8 0 0 1 1 0 5 9

H. Facility's Phone

(213) 595 6597

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. MIXED WASTE OILS AND WATER N.O.S.  
COMBUSTIBLE LIQUID NA 1270

12. Containers  
No. Type

001 TIT 003215 G

13. Total Quantity

14. Unit Wt/Vol

I. Waste No.

State 221

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

WASTE OIL (+ WATER)

K. Handling Codes for Wastes Listed Above

a. R01

c.

d.

15. Special Handling Instructions and Additional Information

GLOVES

16.

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

JAMES I. COLE

Signature

*James I. Cole*

Month Day Year

11/01/18

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

I CONCEPCION GARRERA

Signature

*I Concepcion Garrera*

Month Day Year

11/01/18

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

RECEIVED

Month Day Year

11/01/18

19. Discrepancy Indication Space

17 1988  
Mercury Aerospace

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

DAVID P. H.

Signature

*David P. H.*

Month Day Year

10/01/18

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

88059602

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

Instructions on the Back

UNIFORM HAZARDOUS  
WASTE MANIFEST

1. Generator's US EPA ID No.

CAD9814131311

Manifest  
Document No.

2. Page 1  
of

Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

MERCURY AEROSPACE INDUSTRIES, INC  
11500 SHILOH ROAD, HOLLYWOOD, CA 91605

A. State Manifest Document Number

88059603

B. State Generator's ID

CAD9814131311

4. Generator's Phone (818) 982 4800

5. Transporter 1 Company Name  
KING & KING SERVICE

6. US EPA ID Number

CAD981423320

C. State Transporter's ID

54200

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

P.R.I. 1835 E. 24TH ST  
SIGNAL HILL, CA 90806

10. US EPA ID Number

CAT080011059

G. State Facility's ID

CAT080011059

H. Facility's Phone

(213) 545 6547

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. MIXED WASTE OILS AND WATER N.O.S.  
COMBUSTIBLE LIQUID NA 1270

12. Containers  
No. Type

001 TIT 4.75 G

13. Total  
Quantity

14. Unit  
Wt/Vol

I. Waste No.

State 221

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

WASTE OILS (+ WATER)

K. Handling Codes for Wastes Listed Above

a. R01

c.

b.

d.

15. Special Handling Instructions and Additional Information

GLOVES.

RECEIVED

NOV 15 1988

16.

Mercury Aerospace

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Printed/Typed Name

JAMES I. COLE

Signature

NOV 15 1988

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

CONCEPCION CARRERA

Signature

NOV 15 1988

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

LUIS PAZ

Signature

11/11/88

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 D.

88059603

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

Please print or type. (Form designed for use on elite (12-pitch typewriter).

# Instructions on the Back

88059605

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

FACILITY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                               |  |                       |  |                                                              |  |                                                                 |  |                    |  |                             |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------|--|-----------------------|--|--------------------------------------------------------------|--|-----------------------------------------------------------------|--|--------------------|--|-----------------------------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 1. Generator's US EPA ID No.<br>CAD9814131311 |  | Manifest Document No. |  | 2. Page 1 of                                                 |  | Information in the shaded areas is not required by Federal law. |  |                    |  |                             |  |
| 3. Generator's Name and Mailing Address<br>MERCURY AEROSPACE FASTENERS, INC<br>11800 SHERMAN WAY, NORTH HOLLYWOOD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                               |  |                       |  | A. State Manifest Document Number<br>88059605                |  |                                                                 |  |                    |  |                             |  |
| 4. Generator's Phone (818) 982 4800 CA 91605                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                               |  |                       |  | B. State Generator's ID<br>CAD9814131311                     |  |                                                                 |  |                    |  |                             |  |
| 5. Transporter 1 Company Name<br>KING AND KING SERVICE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                               |  |                       |  | C. State Transporter's ID                                    |  |                                                                 |  |                    |  |                             |  |
| 6. US EPA ID Number<br>CAD981423320                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                               |  |                       |  | D. Transporter's Phone                                       |  |                                                                 |  |                    |  |                             |  |
| 7. Transporter 2 Company Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                               |  |                       |  | E. State Transporter's ID                                    |  |                                                                 |  |                    |  |                             |  |
| 8. US EPA ID Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                               |  |                       |  | F. Transporter's Phone                                       |  |                                                                 |  |                    |  |                             |  |
| 9. Designated Facility Name and Site Address<br>P.R.I. 1835 E. 29TH ST.<br>SIGNAL HILL CA 90806                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                               |  |                       |  | G. State Facility's ID<br>HAHQ30017252                       |  |                                                                 |  |                    |  |                             |  |
| 10. US EPA ID Number<br>CAT080011059                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                               |  |                       |  | H. Facility's Phone<br>5956597                               |  |                                                                 |  |                    |  |                             |  |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                               |  |                       |  | 12. Containers<br>No. Type                                   |  | 13. Total Quantity                                              |  | 14. Unit<br>Wt/Vol |  | 1. Waste No.                |  |
| a. MIXED WASTE OILS AND WATER NOS<br>COMBUSTIBLE LIQUID NA 1270                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                               |  |                       |  | 011TT010650 G                                                |  |                                                                 |  |                    |  | State 221<br>EPA/Other 3001 |  |
| b.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                               |  |                       |  |                                                              |  |                                                                 |  |                    |  | State<br>EPA/Other          |  |
| c.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                               |  |                       |  |                                                              |  |                                                                 |  |                    |  | State<br>EPA/Other          |  |
| d.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                               |  |                       |  |                                                              |  |                                                                 |  |                    |  | State<br>EPA/Other          |  |
| J. Additional Descriptions for Materials Listed Above<br>RECYCLABLE OIL (+WATER)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                               |  |                       |  | K. Handling Codes for Wastes Listed Above<br>a. R01 b. c. d. |  |                                                                 |  |                    |  |                             |  |
| 15. Special Handling Instructions and Additional Information<br>GLOVES.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                               |  |                       |  |                                                              |  |                                                                 |  |                    |  |                             |  |
| 16. <b>GENERATOR'S CERTIFICATION:</b> I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.<br><br>If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.<br><br>Printed/Typed Name: JAMES I. COLE Signature: [Signature] Month: 12 Day: 28 Year: 88<br><br>17. Transporter 1 Acknowledgement of Receipt of Materials<br>Printed/Typed Name: J. CONCEPCION CARRERA Signature: [Signature] Month: 12 Day: 28 Year: 88<br><br>18. Transporter 2 Acknowledgement of Receipt of Materials<br>Printed/Typed Name: Signature: Month: Day: Year:<br><br>19. Discrepancy Indication Space<br><br>20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.<br>Printed/Typed Name: DAVID PLATT Signature: [Signature] Month: 12 Day: 28 Year: 88 |  |                                               |  |                       |  |                                                              |  |                                                                 |  |                    |  |                             |  |

RECEIVED  
JAN 1 1989

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DA

**Instructions on the Back**

Do Not Write Below This Line

Yellow: TSDf SENDS THIS COPY TO GENERATOR WITHIN 30 D

DHS 8022 A (1/88)  
EPA 8700—22  
(Rev. 9-88) Previous editions are obsolete.

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

CAAD9811411311311

Manifest  
Document No.

2. Page 1  
of

Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

MELBURY AND SAGE REAL ESTATE INC  
11800 J ST, NORTH HOLLYWOOD, CA 91605

A. State Manifest Document Number

88059606

B. State Generator's ID

CAAD9811411311311

C. State Transporter's ID

54200

D. Transporter's Phone

(213) 434-8500

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

HHVAG360171252

H. Facility's Phone

I. DATE

9. Designated Facility Name and Site Address

PRC 1835 E 29TH ST  
SILVER LAKE CA 90866

10. US EPA ID Number

CAAD9811411311311

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. MIXED WASTE OILS AND WATER N.O.S.  
COMBUSTIBLE LIQUID NA 1270

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

15. Waste No.

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

RECYCLABLE OIL (+ WATER)

K. Handling Codes for Wastes Listed Above

a. RO1

b.

c.

d.

15. Special Handling Instructions and Additional Information

GLOVES.

16.

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Printed/Typed Name

JAMES I COLE

Signature

[Signature]

Month Day Year

02/10/18/19

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

J CONCEPTS CARRIEN

Signature

[Signature]

Month Day Year

02/26/18/19

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

88059607

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

FACILITY

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

CAD981413131

Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

MELBURN/ALDOSSACE TRACT NEAR, INC  
11800 SHELTON WAY, NO. 1111/1000, CA 91605

A. State Manifest Document Number

88059607

B. State Generator's ID

CAD981413131

C. State Transporter's ID

54200

D. Transporter's Phone (213) 437-8500

4. Generator's Phone (818) 982-4800

5. Transporter 1 Company Name

KING AND KING TRANSPORT CO

6. US EPA ID Number

CAD9814123320

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

PRC 1835 E. 29TH ST.  
SIGNAL HILL CA 90806

10. US EPA ID Number

CAT0801011059

G. State Facility's ID

HH11036017252

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. MIXED WASTE OILS AND WATER N.O.S.  
COMBUSTIBLE LIQUID NA 1270

12. Containers

No. Type

OT TT 00 525 6

13. Total Quantity

Unit Wt/Vol

525 6

14. Unit

Wt/Vol

525 6

I. Waste No.

State

221

EPA/Other

2001

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

RECYCLABLE OIL (+ WATER)

K. Handling Codes for Wastes Listed Above

a. RO1

c.

d.

15. Special Handling Instructions and Additional Information

GLOVES

16.

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Printed/Typed Name

JAMES I. COLE

Signature

[Signature]

Month Day Year

02 23 89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

J. COLEMAN (ARRIVED)

Signature

[Signature]

Month Day Year

02 23 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

## Instructions on the Back

Sacramento, California

UNIFORM HAZARDOUS  
WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest  
Document No.2. Page 1  
ofInformation in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

MERCURY AEROSPACE FASTENERS, INC  
11800 SHERMAN WAY, WORTH HOLLYWOOD, CA 91605

A. State Manifest Document Number

88059608

B. State Generator's ID

CAD98114131311

4. Generator's Phone

(818) 982 4800

5. Transporter 1 Company Name

KING &amp; KING OIL COMPANY

6. US EPA ID Number

CAD9811423320

C. State Transporter's ID

54200

D. Transporter's Phone

(213) 439 8500

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

PLC 1835 E. 29TH ST.  
SIGNAL HILL CA 90806

10. US EPA ID Number

KAT108010111059

G. State Facility's ID

HHH036017252

H. Facility's Phone

(213) 595 6597

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. MIXED WASTE OILS AND WATER M.O.S.  
COMBUSTIBLE LIQUID NA 127012. Containers  
No. Type

107 TIT 006110 G

13. Total  
Quantity14. Unit  
Wt/Vol

I. Waste No.

State 221

EPA/Other 8001

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

RECYCLABLE OIL (+ WATER)

K. Handling Codes for Wastes Listed Above

a. R01

c.

d.

15. Special Handling Instructions and Additional Information

GLOVES

16.

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Printed/Typed Name

JAMES I. COLE

Signature

Month Day Year

10/21/89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

KENNETH T. KING

Signature

Month Day Year

04/21/89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

88059608  
GENERATOR  
SPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL  
TRANSPORTER  
FACILITY

Please print or type. (Form designed for use on elite (12-pitch typewriter).

INSTRUCTIONS ON REVERSE

UNIFORM HAZARDOUS  
WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest  
Document No.

2. Page 1

Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

A. State Manifest Document Number

88059609

B. State Generator's ID

4. Generator's Phone ( )

5. Transporter 1 Company Name

6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No.

Type

13. Total  
Quantity14. Unit  
Wt/Vol

I. Waste No.

a.

State

EPA/Other

b.

State

EPA/Other

c.

State

EPA/Other

d.

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

a.

b.

c.

d.

15. Special Handling Instructions and Additional Information

16.

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Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

FACILITY

UNIFORM HAZARDOUS  
WASTE MANIFEST

1. Generator's US EPA ID No.

CAD9811413131

Manifest  
Document No.

2. Page 1  
of

Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

Mercury Aerospace Fasteners, Inc.  
11800 Sherman Way, No. Hollywood, CA  
91605

A. State Manifest Document Number

88059610

B. State Generator's ID

CAD9811413131

4. Generator's Phone (818) 982-4800

6. US EPA ID Number

CAD98114231320

C. State Transporter's ID

D. Transporter's Phone (213) 439-8500

5. Transporter 1 Company Name

King and King Drain Oil Co.

8. US EPA ID Number

7. Transporter 2 Company Name

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

PRC 1835 E. 29th St.  
Signal Hill, CA 90806

10. US EPA ID Number

CATID8001110519

G. State Facility's ID

HHHID316011725121

H. Facility's Phone

213-595-6597

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

15. Waste No.

a. MIXED WASTE OILS AND WATER NDS.  
COMBUSTIBLE LIQUID NA 1270

10TTT 904120 G

State 221

EPA/Other D001

State

EPA/Other

State

EPA/Other

State

EPA/Other

b. ~~FIVE HUNDRED AND FIFTY FIVE GALLONS ON~~

c.   
d.   
MURPHY & SONS

J. Additional Descriptions for Materials Listed Above

RECYCLABLE OIL (+ WATER)

K. Handling Codes for Wastes Listed Above

a. ROI

c. 19

15. Special Handling Instructions and Additional Information

GLOVES

16.

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Printed/Typed Name

Signature

Month Day Year

TERRELL W. ASL

[Signature]

10/15/89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

J. CONCEPCION CARREPA

[Signature]

10/18/89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

Peter M. [Signature]

[Signature]

10/21/89

88059610  
IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

Please print or type. (Form designed for use on elite (12-pitch typewriter).

Instructions on the Back

UNIFORM HAZARDOUS  
WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest  
Document No.

2. Page 1

of

Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

MENARDY ALL-SPACE FASTENERS INC.  
11500 SHERMAN AVE. #100  
CA.

4. Generator's Phone ( ) 708 960 9605

5. Transporter 1 Company Name

KING ARK NO. 1. AIN OIL CO. KAD 9311423320

7. Transporter 2 Company Name

9. Designated Facility Name and Site Address

AKC 1505 B. 29TH ST

SIGNAL HILL CAL. 90806 KAT 0000111059

10. US EPA ID Number

A. State Manifest Document Number

88059611

B. State Generator's ID

CAD 9311423320

C. State Transporter's ID

D. Transporter's Phone 54200 213-439-8506

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

I. Waste No.

a. HAZARDOUS WASTE OILS AND WATERS, N.O.S.

COMBUST B/L 1600 NA 1270

C10117 C10141561

State 321

EPA/Other 2001

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

RECYCLABLE OIL (T WATER)

K. Handling Codes for Wastes Listed Above

a. R01

b.

c.

d.

15. Special Handling Instructions and Additional Information

CHANGES.

16.

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Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

88059611  
IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

**UNIFORM HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

Manifest  
Document No.

2. Page 1  
of

Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

**MERCURY AEROSPACE FASTENERS**

4. Generator's Phone **11800 Sherman Way, North Hollywood, CA 91609**

5. Transporter 1 Company Name

6. US EPA ID Number

7. Transporter 2 Company Name **King & King Drain Oil Service**

8. US EPA ID Number

9. Designated Facility Name and Site Address

**PETROLEUM RECYCLING CORPORATION**

**1835 E. 29th St., Signal Hill, CA 90806**

10. US EPA ID Number

A. State Manifest Document Number

**88059612**

B. State Generator's ID

**CA 27814131**

C. State Transporter's ID

**HA 11036122942**

D. Transporter's Phone **54200**

E. State Transporter's ID **213-439-8500**

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

13. Total  
Quantity

14. Unit  
Wt/Vol

1. Waste No.

a. **Waste Oil No 0.5., Combustible Liquid NA 1993**

No. Type

**0 0 1 TT**

**201306**

**G**

State

EPA/Other **223**

State **D001**

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

**Contaminated with Halogenated Solvents**

K. Handling Codes for Wastes Listed Above

a.

b.

c.

d.

**R01**

15. Special Handling Instructions and Additional Information

**Gloves**

16.

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Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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Printed/Typed Name

Signature

Month Day Year

88059612  
IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

88366884

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

| UNIFORM HAZARDOUS WASTE MANIFEST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 1. Generator's US EPA ID No.                  |  | Manifest Document No.                                                                             |  | 2. Page 1 of 1                                |  | Information in the shaded areas is not required by Federal law. |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------|--|---------------------------------------------------------------------------------------------------|--|-----------------------------------------------|--|-----------------------------------------------------------------|--|
| 3. Generator's Name and Mailing Address<br>HERCULES AEROSPACE<br>11800 SHELMAN WY. N. HOLLYWOOD<br>4. Generator's Phone (213) 982-4800 CA 91609                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | 6. US EPA ID Number<br>CA0981413131           |  | 8. US EPA ID Number<br>CA0981422140                                                               |  | A. State Manifest Document Number<br>88366884 |  | B. State Generator's ID<br>HAAQ36022942                         |  |
| 5. Transporter 1 Company Name<br>NORWALK TANK                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | 7. Transporter 2 Company Name<br>NORWALK TANK |  | 9. Designated Facility Name and Site Address<br>CASIMIA RESOURCES<br>INTV RD<br>CASIMIA, CA 93429 |  | 10. US EPA ID Number<br>CA0981422140          |  | C. State Transporter's ID<br>012641                             |  |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 12. Containers                                |  | 13. Total Quantity                                                                                |  | 14. Unit Wt/Vol                               |  | 1. Waste No.                                                    |  |
| a. WASTE METAL GRINDINGS<br>(METAL GRINDINGS + OIL) ORNIC UN 2793                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | No. 3                                         |  | Type DM                                                                                           |  | Quantity 91010 P                              |  | State 171                                                       |  |
| b.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                               |  |                                                                                                   |  |                                               |  | EPA/Other NONE                                                  |  |
| c.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                               |  |                                                                                                   |  |                                               |  | State                                                           |  |
| d.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                               |  |                                                                                                   |  |                                               |  | EPA/Other                                                       |  |
| J. Additional Descriptions for Materials Listed Above<br>A STEEL GRINDINGS, CUTTING OIL<br>AND FLOOR SWEEP, IN 55 GAL.<br>DRUMS, SOLID + DRY<br>APPROVAL #15920635 CR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | K. Handling Codes for Wastes Listed Above     |  | a. 03                                                                                             |  | b.                                            |  | c.                                                              |  |
| 15. Special Handling Instructions and Additional Information<br>CLOVES + COGLES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                               |  |                                                                                                   |  |                                               |  |                                                                 |  |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.<br>If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. |  | Printed/Typed Name<br>TERRY MASAL             |  | Signature<br>Terry Masal                                                                          |  | Month Day Year<br>11/10/89                    |  |                                                                 |  |
| 17. Transporter 1 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Printed/Typed Name<br>TERRY MASAL             |  | Signature<br>Terry Masal                                                                          |  | Month Day Year<br>11/10/89                    |  |                                                                 |  |
| 18. Transporter 2 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Printed/Typed Name                            |  | Signature                                                                                         |  | Month Day Year                                |  |                                                                 |  |
| 19. Discrepancy Indication Space                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                               |  |                                                                                                   |  |                                               |  |                                                                 |  |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | Printed/Typed Name                            |  | Signature                                                                                         |  | Month Day Year                                |  |                                                                 |  |

**UNIFORM HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

Manifest  
Document No.

2. Page 1

Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

C A D 9 8 1 4 1 3 1 3 1 6 6 9 9 1 8

A. State Manifest Document Number

88366998

B. State Generator's ID

H A W 9 3 6 0 2 2 9 4 2

C. State Transporter's ID

D. Transporter's Phone

012641

E. State Transporter's ID

(213) 921-5171

F. Transporter's Phone

012640

G. State Facility's ID

(213) 921-5171

H. Facility's Phone

(805) 937-8449

5. Transporter 1 Company Name

8. US EPA ID Number

NORMALE DRUM

C A D 9 8 1 4 2 2 1 4 0

7. Transporter 2 Company Name

C A D 9 8 1 4 2 2 1 4 0

9. Designated Facility Name and Site Address

C A D 9 8 1 4 2 2 1 4 0

CASTALIA RESOURCES

MTG. CO.

CASTALIA, CA. 93429

C A D 0 2 0 7 4 8 1 2 5

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Container

13. Total

14. Unit

1. Waste No.

a.

WASTE METAL GRINDINGS OIL  
(STEEL GRINDINGS & CUTTING OIL) UN2793

No.

Type

Quantity

Wt/Vol

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

A. STEEL GRINDINGS, CUTTING OIL, AND FLOOR SWEEP IN  
55 GALLON DRUMS. SOLID & DRY

approval # 15920625

K. Handling Codes for Wastes Listed Above

a.

b.

c.

d.

03

15. Special Handling Instructions and Additional Information

GLOVES AND GOGGLES

16.

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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Printed/Typed Name

Signature

Month Day Year

88366998  
IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL  
TOXIC SUBSTANCE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY



Please print or type. (Form designed for use on elite (12-pitch typewriter))

Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **CAD981422140** Manifest Document No. **7193**

2. Page 1 of 1 Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address  
**MERCURY AEROSPACE**  
**11800 Sherman Wy., N. Hollywood, CA 91609**  
4. Generator's Phone ( **213** ) **982-4800**

A. State Manifest Document Number  
**88087193**  
B. State Generator's ID  
**HAHD36022942**

5. Transporter 1 Company Name **NORWALK DRUM** 6. US EPA ID Number **CAD981422140**

C. State Transporter's ID **906610**  
D. Transporter's Phone **213/921-5171**

7. Transporter 2 Company Name **NORWALK DRUM** 8. US EPA ID Number **CAD981422140**

E. State Transporter's ID  
F. Transporter's Phone **213/921-5171**

9. Designated Facility Name and Site Address  
**CASHALIA RESOURCES**  
**RTU RD.**  
**CASHALIA, CA 93429** 10. US EPA ID Number **CAD020748125**

G. State Facility's ID  
**CAD981422140**  
H. Facility's Phone **805/937-8449**

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)              | 12. Containers<br>No. | 13. Total<br>Quantity | 14. Unit<br>Wt/Vol | 1. Waste No.                              |
|---------------------------------------------------------------------------------------------------|-----------------------|-----------------------|--------------------|-------------------------------------------|
|                                                                                                   |                       |                       |                    |                                           |
| a. <b>HAZAL Waste metal grindings Orm C UN 2793</b><br><b>(steel grindings &amp; cutting oil)</b> | <b>1</b>              | <b>1</b>              | <b>P</b>           | State <b>171</b><br>EPA/Other <b>none</b> |
| b.                                                                                                |                       |                       |                    | State<br>EPA/Other                        |
| c.                                                                                                |                       |                       |                    | State<br>EPA/Other                        |
| d.                                                                                                |                       |                       |                    | State<br>EPA/Other                        |

J. Additional Descriptions for Materials Listed Above  
**a. Steel grindings, cutting oil and floor sweep in 55**  
**gal. drums. Solid & dry**  
**APPROVAL # 15920625**

K. Handling Codes for Wastes Listed Above  
a. **03** b.  
c. d.

15. Special Handling Instructions and Additional Information  
**gloves and goggles**

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.  
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Printed/Typed Name Signature Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name Signature Month Day Year

88087193  
IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

89797847

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802, WITHIN CALIFORNIA CALL 1-800-852-7550

| UNIFORM HAZARDOUS WASTE MANIFEST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 1. Generator's US EPA ID No                     | Manifest Document No | 2. Page 1 of                                         | Information in the shaded areas is not required by Federal law |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------|----------------------|------------------------------------------------------|----------------------------------------------------------------|
| 3. Generator's Name and Mailing Address<br><b>MERCURY AEROSPACE</b><br>11800 Sherman Wy., North Hollywood, CA 91609                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | C A D 9 8 1 4 1 3 1 3 1 7 8 4 7                 |                      | A. State Manifest Document Number<br><b>89797847</b> |                                                                |
| 4. Generator's Phone<br><b>(213) 982-4800</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                 |                      | B. State Generator's ID<br><b>HAH036022942</b>       |                                                                |
| 5. Transporter 1 Company Name<br><b>NORWALK DRUM</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 6. US EPA ID Number<br>C A D 9 8 1 4 2 2 1 4 0  |                      | C. State Transporter's ID<br><b>012641</b>           |                                                                |
| 7. Transporter 2 Company Name<br><b>NORWALK DRUM</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 8. US EPA ID Number<br>C A D 9 8 1 4 2 2 1 4 0  |                      | D. Transporter's Phone<br><b>213/921-5171</b>        |                                                                |
| 9. Designated Facility Name and Site Address<br><b>U.S. ECOLOGY on Hwy. 95, 11 mi. south of BEATTY, NV 89003</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 10. US EPA ID Number<br>N V T 3 3 0 0 1 0 0 0 0 |                      | E. State Transporter's ID<br><b>012640</b>           |                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                 |                      | F. Transporter's Phone<br><b>213/921-5171</b>        |                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                 |                      | G. State Facility's ID<br><b>702/553-2203</b>        |                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                 |                      | H. Facility's Phone                                  |                                                                |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 12. Containers                                  | 13. Total Quantity   | 14. Unit                                             | I. Waste No.                                                   |
| a. <b>Waste-metal grindings—ORM C—UN 2793 (steel grindings &amp; cutting oil)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | No                                              | Type                 | Quantity                                             | State                                                          |
| b.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                 |                      |                                                      | EPA/Other                                                      |
| c.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                 |                      |                                                      | State                                                          |
| d.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                 |                      |                                                      | EPA/Other                                                      |
| J. Additional Descriptions for Materials Listed Above                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | K. Handling Codes for Wastes Listed Above       |                      |                                                      |                                                                |
| A. Steel grindings, cutting oil, and floor sweep, in 55 gal. drums. Solid & dry                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | a. <b>03</b>                                    |                      | b.                                                   |                                                                |
| WS # 07-004-9317                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | c.                                              |                      | d.                                                   |                                                                |
| 15. Special Handling Instructions and Additional Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                 |                      |                                                      |                                                                |
| gloves and goggles                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                 |                      |                                                      |                                                                |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.<br>If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. |  |                                                 |                      |                                                      |                                                                |
| Printed/Typed Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Signature                                       |                      | Month Day Year                                       |                                                                |
| 17. Transporter 1 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Signature                                       |                      | Month Day Year                                       |                                                                |
| 18. Transporter 2 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Signature                                       |                      | Month Day Year                                       |                                                                |
| 19. Discrepancy Indication Space                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                 |                      |                                                      |                                                                |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                 |                      |                                                      |                                                                |
| Printed/Typed Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Signature                                       |                      | Month Day Year                                       |                                                                |

Do Not Write Below This Line

Follow: TSDP SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

# Instructions on the Back

## UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

**MERCURY AEROSPACE FASTENERS**  
11800 Sherman Way, North Hollywood, CA 91609

4. Generator's Phone (818) 982-4800

5. Transporter 1 Company Name

**King Waste Co.**

6. US EPA ID Number

CAL 0000027490

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

**Industrial Service Co.**  
1700 Soto St., Los Angeles CA 90023

10. US EPA ID Number

CAL 099452708

A. State Manifest Document Number

**88059618**

B. State Generator's ID

CAL 981413131

C. State Transporter's ID

2668

D. Transporter's Phone

(213) 439-8500

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

(213) 262-9747

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers  
No. Type

13. Total Quantity

14. Unit  
Wt/Vol

I. Waste No.

a. **Waste oils NHO:S.**  
**Combustible liquid NA 1270**

10 1T 1T 010 1650 G

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

**Waste Oil'**

K. Handling Codes for Wastes Listed Above

a.

b.

c. **RO1**

d.

15. Special Handling Instructions and Additional Information

**gloves**

16.

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

FACILITY

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

89797803

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest  
Document No.

2. Page 1

Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

MERCURY AEROSPACE  
11800 SHERMAN WAY, NORTH HOLLYWOOD

4. Generator's Phone

818 982-4800

6. US EPA ID Number

CA 91609

5. Transporter 1 Company Name

NORWALK DRUM INC. CA 0981422140

7. Transporter 2 Company Name

NORWALK DRUM INC. CA 0981422140

9. Designated Facility Name and Site Address

U.S. ECOLOGY HWY. 95 11 MI. SOUTH OF  
BEATTY, NEVADA 89031 MT 330010000

10. US EPA ID Number

A. State Manifest Document Number

89797803

B. State Generator's ID

HAHQ36022942

C. State Transporter's ID

012641

D. Transporter's Phone

213 921 5171

E. State Transporter's ID

012640

F. Transporter's Phone

213 921 5171

G. State Facility's ID

H. Facility's Phone

(702) 553-2203

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

I. Waste No.

a. WASTE METAL GRINDINGS + OIL SLUDG  
(CA. REG. WASTE)

12. Containers

No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

I. Waste No.

b.

12. Containers

No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

I. Waste No.

c.

12. Containers

No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

I. Waste No.

d.

12. Containers

No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

I. Waste No.

J. Additional Descriptions for Materials Listed Above

A. STEEL GRINDINGS, CUTTING OIL,  
AND FLOOR SWEEP. SOLID + OILY.  
INS 070049317

K. Handling Codes for Wastes Listed Above

a. 03

b.

c.

d.

15. Special Handling Instructions and Additional Information

GLOVES + GOGGLES

16.

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name

J. FULTMENT

Signature

Month Day Year 04/19/90

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

DAUG MASON

Signature

Month Day Year 04/19/90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

89797912

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

FACILITY

| UNIFORM HAZARDOUS WASTE MANIFEST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 1. Generator's US EPA ID No.                                                                            | Manifest Document No. | 2. Page 1 of 1                                            | Information in the shaded areas is not required by Federal law. |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------|-----------------------|-----------------------------------------------------------|-----------------------------------------------------------------|
| 3. Generator's Name and Mailing Address<br>MENCOVY HEAVY SPACE<br>11800 SHELMAN WAY N. HOLLYWOOD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | CA098VH1313191212                                                                                       |                       | A. State Manifest Document Number<br>89797912             |                                                                 |
| 4. Generator's Phone<br>818 982-7800 CM.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | 5. Transporter 1 Company Name<br>NORWALK TRAM INC                                                       |                       | B. State Generator's ID<br>H44R36022942                   |                                                                 |
| 6. US EPA ID Number<br>CA098VH1313191212                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | 7. Transporter 2 Company Name                                                                           |                       | C. State Transporter's ID<br>012883                       |                                                                 |
| 8. US EPA ID Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | 9. Designated Facility Name and Site Address<br>U.S. ECOLOGY, ON HWY. 95 11 MI. SOUTH OF<br>BEATTY, NV. |                       | D. Transporter's Phone<br>213 921 5171                    |                                                                 |
| 10. US EPA ID Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)                    |                       | E. State Transporter's ID                                 |                                                                 |
| 89003 NVIT33001100010                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | WASTE SOIL AND LUBE OIL<br>(CA. REG. WASTE ONLY)                                                        |                       | F. Transporter's Phone                                    |                                                                 |
| 12. Containers<br>No. Type                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | 13. Total Quantity                                                                                      |                       | 14. Unit<br>Wt/Vol                                        |                                                                 |
| 0101 DT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 80100 P                                                                                                 |                       | I. Waste No.<br>State 611<br>EPA/Other NONE               |                                                                 |
| 15. Special Handling Instructions and Additional Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | J. Additional Descriptions for Materials Listed Above                                                   |                       | K. Handling Codes for Wastes Listed Above                 |                                                                 |
| GLOVES + GOGGLES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | A. SOIL CONTAMINATED WITH<br>LUBE OIL. SOLID + DRY.<br>WS 07 005 8656                                   |                       | a. 03<br>b.<br>c.<br>d.                                   |                                                                 |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.<br>If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. |  | 17. Transporter 1 Acknowledgement of Receipt of Materials                                               |                       | 18. Transporter 2 Acknowledgement of Receipt of Materials |                                                                 |
| Printed/Typed Name<br>T. M. M. M.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | Signature<br>[Signature]                                                                                |                       | Month Day Year<br>11 11 90                                |                                                                 |
| Printed/Typed Name<br>DOUG MASON                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | Signature<br>[Signature]                                                                                |                       | Month Day Year<br>04 25 90                                |                                                                 |
| Printed/Typed Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Signature                                                                                               |                       | Month Day Year                                            |                                                                 |
| 19. Discrepancy Indication Space                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | Actual quantity received = 6380P.                                                                       |                       |                                                           |                                                                 |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                         |                       |                                                           |                                                                 |
| Printed/Typed Name<br>R. L. M. M.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | Signature<br>[Signature]                                                                                |                       | Month Day Year<br>10 5 1990                               |                                                                 |

**UNIFORM HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

Manifest  
Document No.

2. Page 1

Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

**Mercury Aerospace**  
**11800 Sherman Wy. N. Hollywood CA 91609**

4. Generator's Phone ( )

A. State Manifest Document Number

**89797864**

B. State Generator's ID

**H A H Q 3 6 0 2 2 9 4 2**

5. Transporter 1 Company Name

**Norwalk Drum**

6. US EPA ID Number

**C A D 9 8 1 4 2 2 1 8 0**

C. State Transporter's ID

**012641**

7. Transporter 2 Company Name

**Norwalk Drum**

8. US EPA ID Number

**C A D 9 8 1 4 2 2 1 4 0**

D. Transporter's Phone

**(213)921-5171**

E. State Transporter's ID

**012640**

F. Transporter's Phone

**(213)921-5171**

9. Designated Facility Name and Site Address

**U.S. Ecology, Hwy. 95, 11 mi. S. of Beatty, NV 89003**

10. US EPA ID Number

**N V T 3 3 0 0 1 0 0 0 0**

G. State Facility's ID

**N V T 3 3 0 0 1 0 0 0 0**

H. Facility's Phone

**(702)553-2203**

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

**Waste metal grindings and oil. Solid**  
**(Ca. Regg waste)**12. Containers  
No. Type**1 1 0 D M**13. Total  
Quantity**5 0 0 0 0**14. Unit  
Wt/Vol**P**

I. Waste No.

State  
**171**

EPA/Other

**NONE**

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

**A. Steel grindings, cutting oil, floor sweep and**  
**vermiculite. Solid and dry****HS 07-004-9317**

K. Handling Codes for Wastes Listed Above

a. **03**

b.

c.

d.

15. Special Handling Instructions and Additional Information

**DISPOSED IMMEDIATELY Goggles and goggles**

18. I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE IS:

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name

**J FLAMANT**

Signature

Month Day Year

**10 5 11 0 9 10**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**DOUG MASON**

Signature

Month Day Year

**10 5 11 0 9 10**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**DOUG MASON**

Signature

Month Day Year

**10 5 11 4 9 0**

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

**R L Marchand**

Signature

Month Day Year

**10 5 11 4 9 10**

Do Not Write Below This Line

89797864

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

## Instructions on the Back

**UNIFORM HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

Manifest  
Document No.2. Page 1  
ofInformation in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

**Mercury Aerospace Fasteners**  
11800 Sherman Way, North Hollywood, CA 91609

4. Generator's Phone

818 982-4800

5. Transporter 1 Company Name

**King Waste Company**

6. US EPA ID Number

6 AL 0000027490

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

**Industrial Service Co.**  
1700 Soto St., Los Angeles CA 90023

10. US EPA ID Number

1C AD 099452708

A. State Manifest Document Number

**88060548**

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

(213) 262-9747

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. **Waste Oils N. O. S.**  
**Combustible Liquid NA 1270**12. Containers  
No. Type13. Total  
QuantityUnit  
Wt/VolI.  
Waste No.

101T 01T 04B 50 G

b.

c.

d.

J. Additional Descriptions for Materials Listed Above

**Waste Oil**

K. Handling Codes for Wastes Listed Above

a.

b.

**R01**

c.

d.

15. Special Handling Instructions and Additional Information

**Gloves**

16.

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Printed/Typed Name

**Terry Masl**

Signature

Month Day Year

5 29 11

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

**Andy A. Shubin**

Do Not Write Below This Line

10 5 29 1990

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-9802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

# Instructions on the Back

## UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

MERCURY AEROSPACE FASTENERS

11800 Sherman Way, No. Hollywood, CA 91609

4. Generator's Phone (

818 982-4800

5. Transporter 1 Company Name

6. US EPA ID Number

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

Industrial Service Co.

1700 Soto St., Los Angeles, CA 90023

10. US EPA ID Number

A. State Manifest Document Number

88060536

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

(213) 262-9747

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. Waste Oils N. O. S.  
Combustible Liquid NA 1270

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

I. Waste No.

State

EPA/Other 221

State D001

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

Waste Oil

K. Handling Codes for Wastes Listed Above

a.

b.

c. RO1

d.

15. Special Handling Instructions and Additional Information

Golves

16.

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name

Signature

Month Day Year

Jerome A. Flament

10 6 21 90

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

James S. Huber

John S. Huber

6 6 21 90

Do Not Write Below This Line

88060536

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802. WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

Please print or type. (Form designed for use on elite (12-pitch typewriter).

# Instructions on the Back

Department of Health Services  
Toxic Substances Control Division  
Sacramento, California

## UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1 of

information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

MERCURY AEROSPACE  
11800 SHERMANWAY, NO. HOLLYWOOD, CA - 91609

4. Generator's Phone

(818) 982-4800

5. Transporter 1 Company Name

KING WASTE CO

6. US EPA ID Number

1041100002741910

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

INDUSTRIAL SERVICE CO  
1700 SOTO ST. LOS ANGELES CA - 90023

10. US EPA ID Number

1041100002741910

A. State Manifest Document Number

88060546

B. State Generator's ID

1041100002741910

C. State Transporter's ID

D. Transporter's Phone

213-439-8600

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

213-262-9747

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

I. Waste No.

a. WASTE OILS M.O.S.  
COMBUSTIBLE LIQUID NA 1270

0101 TT00375 9

State 221  
EPA/Other 2001

b. JUL 25 1988

State  
EPA/Other  
State  
EPA/Other  
State  
EPA/Other

J. Additional Descriptions for Materials Listed Above

WASTE OIL

K. Handling Codes for Wastes Listed Above

a. RO1

b.

c.

d.

15. Special Handling Instructions and Additional Information

GLOVES

16.

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.  
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

88060546  
GENERATOR  
IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

89797983

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

**Mercury Aerospace**  
11800 Sherman Way North Hollywood, CA 91609  
4. Generator's Phone 213 982-4900

5. Transporter 1 Company Name

6. US EPA ID Number

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

10. US EPA ID Number

**U.S. Ecology**  
HWY 95, 11 mi S. of  
Beatty, NV 89003

NVT 3330010000

702/553-2203

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

15. Waste No.

a. **CA reg. waste only**  
**(metal grindings & oil)**

29 DM

8.1

Y

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

**A. Steel grindings, cutting oil and floor sweep.**  
**solid and dry**  
**WS 070049317**

K. Handling Codes for Wastes Listed Above

a.

b.

03

c.

d.

15. Special Handling Instructions and Additional Information

**gloves and goggles**

16.

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

11a) 1 DM retd 10 g for unrec'd for 1.0

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

Signature

Month Day Year

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

# Instructions on the Back

Department of Health Services  
Toxic Substances Control Division  
Sacramento, California

## UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

CAL09811411311311

Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

MERCURY AEROSPACE FASTENERS  
11800 Sherman Way, North Hollywood, CA 91609

4. Generator's Phone

818-982-4800

5. Transporter 1 Company Name

King Waste Co.

6. US EPA ID Number

CAL000027490

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

Industrial Service Co.  
1700 Soto St. Los Angeles, CA 90023

10. US EPA ID Number

A. State Manifest Document Number

88060484

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. Waste Oils H.O.S.  
Combustible Liquid NA 1270

SEP 7 1990

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

I. Waste No.

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

Waste Oil

K. Handling Codes for Wastes Listed Above

a.

b.

c.

d.

15. Special Handling Instructions and Additional Information

Gloves

16.

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name

Signature

Month Day Year

Terry Masl

17. Transporter 1 Acknowledgement of Receipt of Materials

Signature

Month Day Year

Printed/Typed Name

J. CONCEPCION CARRERA

18. Transporter 2 Acknowledgement of Receipt of Materials

Signature

Month Day Year

Printed/Typed Name

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

Signature

Month Day Year

Luis MESA

Do Not Write Below This Line

Yellow: TSDf SENDS THIS COPY TO GENERATOR WITHIN 30 DAY!

88060484  
IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7650.

GENERATOR

TRANS

PORTER

FACILITY

91060832

# GENERATOR

Do Not Write Below This Line

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

Mercury Aerospace Fasteners  
11800 Sherman Way North Hollywood.

4. Generator's Phone

818 982-4800

CA. 91609

5. Transporter 1 Company Name

King Waste Co.

6. US EPA ID Number

CA 000027490

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

Industrial Service Co.  
1700 Soto St. Los Angeles, CA 90023

10. US EPA ID Number

CA 0009145127018

A. State Manifest Document Number

88060487

B. State Generator's ID

CA 00091413131

C. State Transporter's ID

2668

D. Transporter's Phone

213 439-8500

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

213 262-9747

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. Waste oil NOS  
Combustible Liquid NA 1270

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

15. Waste No.

010117 010310 G

State 221  
EPA/Other 1001

RECEIVED

OCT - 5 1990

J. Additional Descriptions for Materials Listed Above

Waste oil and water

K. Handling Codes for Wastes Listed Above

a. RO1

b.

c.

d.

15. Special Handling Instructions and Additional Information

gloves

16.

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Printed/Typed Name

THOMAS M. SL

Signature

[Signature]

Month Day Year

11/1/90

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

CONCEPCION CARRERA

Signature

[Signature]

Month Day Year

09/18/90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

LUIS MESA

Signature

[Signature]

Month Day Year

09/18/90

88060487

GENERATOR

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL TOXIC SUBSTANCE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

FACILITY

**UNIFORM HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

CA 0981413131

Manifest  
Document No.2. Page 1  
1 of 1Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

Mercury Aerospace Fastners  
11800 Sherman way North Hollywood, CA 91609

A. State Manifest Document Number

88060491

B. State Generator's ID

4. Generator's Phone (BIA) 981-4800

6. US EPA ID Number

CA 1000027490

C. State Transporter's ID

2668

D. Transporter's Phone 213-437-8500

5. Transporter 1 Company Name

King West Co.

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

Industrial Service Co.  
1700 Soto ST Los Angeles, CA 90023

10. US EPA ID Number

CA 099452708

G. State Facility's ID

H. Facility's Phone

213-262-9747

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. Waste oil NOS.  
combustible Liquid NA 1270

12. Containers

No.

Type

13. Total  
Quantity14. Unit  
Wt/Vol

15. Waste No.

010V TIT 01041210 G

State 221

EPA/Other D001

b.

State

EPA/Other

c.

State

EPA/Other

d.

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

Waste oil + water

K. Handling Codes for Wastes Listed Above

a. Ro1

b.

c.

d.

15. Special Handling instructions and Additional Information

Gloves

16.

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name

TERRY MASL

Signature

[Signature]

Month Day Year

11/1/89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

J. CONCEPCION CARRERA

Signature

[Signature]

Month Day Year

10/15/90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Luis MESA

Signature

[Signature]

Month Day Year

11/9/89

Do Not Write Below This Line

Yellow: TSDf SENDS THIS COPY TO GENERATOR WITHIN 30 D.

88060491

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

Mercury Aerospace Fastners  
11800 Sherman way North Hollywood, Ca

4. Generator's Phone

818 982-4800

6. US EPA ID Number

94609

5. Transporter 1 Company Name

KING HAZARDOUS WASTE

8. US EPA ID Number

KAL000027490

9. Designated Facility Name and Site Address

INDUSTRIAL SERVICE CO.  
1700 SOTO ST.  
LOS ANGELES, CA 90023

10. US EPA ID Number

KAL000027490

A. State Manifest Document Number

88060558

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone

213 435 8500

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

262-9747

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

WASTE OIL NOS  
Combustible Liquid NA 1270

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

15. Waste No.

001 TT 010270 G

State 221  
EPA/Other 3001  
State  
EPA/Other  
State  
EPA/Other

RECEIVED  
NOV 26 1990

J. Additional Descriptions for Materials Listed Above

waste oil

K. Handling Codes for Wastes Listed Above

a. Ro1  
c. d.

15. Special Handling Instructions and Additional Information

Rubber Gloves & Glasses

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

Do Not Write Below This Line

Yellow: TSDf SENDS THIS COPY TO GENERATOR WITHIN 30 I

88060558

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

88060519

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                     |  |                       |  |                                                                              |  |                                                                 |  |                                   |  |                                                 |  |                                   |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------|--|-----------------------|--|------------------------------------------------------------------------------|--|-----------------------------------------------------------------|--|-----------------------------------|--|-------------------------------------------------|--|-----------------------------------|--|--|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 1. Generator's US EPA ID No.<br><b>CAD981413131</b> |  | Manifest Document No. |  | 2. Page 1 of                                                                 |  | Information in the shaded areas is not required by Federal law. |  |                                   |  |                                                 |  |                                   |  |  |  |
| 3. Generator's Name and Mailing Address<br><b>MERCURY AEROSPACE FASTNERS</b><br><b>11800 SHERMAN WAY NORTH HOLLYWOOD</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                     |  |                       |  | A. State Manifest Document Number<br><b>88060519</b>                         |  |                                                                 |  |                                   |  |                                                 |  |                                   |  |  |  |
| 4. Generator's Phone<br><b>818 982-4800</b> <b>CA 91609</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                     |  |                       |  | B. State Generator's ID<br><b>CAD981413131</b>                               |  |                                                                 |  |                                   |  |                                                 |  |                                   |  |  |  |
| 5. Transporter 1 Company Name<br><b>King Hazardous Waste Co. Inc.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                     |  |                       |  | C. State Transporter's ID<br><b>2668</b>                                     |  |                                                                 |  |                                   |  |                                                 |  |                                   |  |  |  |
| 6. US EPA ID Number<br><b>CAL900027490</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                     |  |                       |  | D. Transporter's Phone<br><b>213 439-8500</b>                                |  |                                                                 |  |                                   |  |                                                 |  |                                   |  |  |  |
| 7. Transporter 2 Company Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                     |  |                       |  | E. State Transporter's ID                                                    |  |                                                                 |  |                                   |  |                                                 |  |                                   |  |  |  |
| 8. US EPA ID Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                     |  |                       |  | F. Transporter's Phone                                                       |  |                                                                 |  |                                   |  |                                                 |  |                                   |  |  |  |
| 9. Designated Facility Name and Site Address<br><b>Industrial Service Co.</b><br><b>1700 So. Soto St.</b><br><b>Los Angeles, Ca. 90023</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                     |  |                       |  | G. State Facility's ID                                                       |  |                                                                 |  |                                   |  |                                                 |  |                                   |  |  |  |
| 10. US EPA ID Number<br><b>CAD099452708</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                     |  |                       |  | H. Facility's Phone<br><b>213 262-9747</b>                                   |  |                                                                 |  |                                   |  |                                                 |  |                                   |  |  |  |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                     |  |                       |  | 12. Containers<br>No. Type                                                   |  | 13. Total Quantity                                              |  | 14. Unit Wt/Vol                   |  | 15. Waste No.                                   |  |                                   |  |  |  |
| a. <b>Waste Oil N.O.S.</b><br><b>Combustible Liquid N.A. 1270</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                     |  |                       |  | 001 T TOP325 G                                                               |  |                                                                 |  |                                   |  | State<br><b>22I</b><br>EPA/Other<br><b>DOOI</b> |  |                                   |  |  |  |
| b.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                     |  |                       |  |                                                                              |  |                                                                 |  |                                   |  | State<br>EPA/Other                              |  |                                   |  |  |  |
| c.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                     |  |                       |  |                                                                              |  |                                                                 |  |                                   |  | State<br>EPA/Other                              |  |                                   |  |  |  |
| d.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                     |  |                       |  |                                                                              |  |                                                                 |  |                                   |  | State<br>EPA/Other                              |  |                                   |  |  |  |
| J. Additional Descriptions for Materials Listed Above<br><b>waste oil</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                     |  |                       |  | K. Handling Codes for Wastes Listed Above<br>a. <b>ROI</b><br>b.<br>c.<br>d. |  |                                                                 |  |                                   |  |                                                 |  |                                   |  |  |  |
| 15. Special Handling Instructions and Additional Information<br><b>Gloves</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                     |  |                       |  |                                                                              |  |                                                                 |  |                                   |  |                                                 |  |                                   |  |  |  |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.<br>If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. |  |                                                     |  |                       |  |                                                                              |  |                                                                 |  |                                   |  |                                                 |  |                                   |  |  |  |
| Printed/Typed Name<br><b>RINALD WATT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                     |  |                       |  | Signature<br><i>[Signature]</i>                                              |  |                                                                 |  | Month Day Year<br><b>11/1/91</b>  |  |                                                 |  |                                   |  |  |  |
| 17. Transporter 1 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                     |  |                       |  | Printed/Typed Name<br><b>J. Concepcion Carrera</b>                           |  |                                                                 |  | Signature<br><i>[Signature]</i>   |  |                                                 |  | Month Day Year<br><b>01/07/91</b> |  |  |  |
| 18. Transporter 2 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                     |  |                       |  | Printed/Typed Name                                                           |  |                                                                 |  | Signature                         |  |                                                 |  | Month Day Year                    |  |  |  |
| 19. Discrepancy Indication Space                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                     |  |                       |  |                                                                              |  |                                                                 |  |                                   |  |                                                 |  |                                   |  |  |  |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                     |  |                       |  |                                                                              |  |                                                                 |  |                                   |  |                                                 |  |                                   |  |  |  |
| Printed/Typed Name<br><b>LUIS MESA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                     |  |                       |  | Signature<br><i>[Signature]</i>                                              |  |                                                                 |  | Month Day Year<br><b>01/07/91</b> |  |                                                 |  |                                   |  |  |  |

| UNIFORM HAZARDOUS WASTE MANIFEST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | 1. Generator's US EPA ID No.                          | Manifest Document No. | 2. Page 1 of                                               | Information in the shaded areas is not required by Federal law. |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------|-----------------------|------------------------------------------------------------|-----------------------------------------------------------------|
| 3. Generator's Name and Mailing Address<br><b>Mercury Aerospace Fasteners</b><br><b>11800 Sherman Way North Hollywood, Ca.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | CA D 9 8 1 1 4 1 3 1 3 1                              |                       | A. State Manifest Document Number<br><b>88060567</b>       |                                                                 |
| 4. Generator's Phone<br><b>818 982-4800</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 91609                                                 |                       | B. State Generator's ID<br><b>CA D 9 8 1 1 4 1 3 1 3 1</b> |                                                                 |
| 5. Transporter 1 Company Name<br><b>King Hazardous Waste Co. Inc.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | 6. US EPA ID Number<br><b>0 A 1 0 0 0 2 7 4 9 6</b>   |                       | C. State Transporter's ID<br><b>2668</b>                   |                                                                 |
| 7. Transporter 2 Company Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | 8. US EPA ID Number                                   |                       | D. Transporter's Phone<br><b>213 439-8500</b>              |                                                                 |
| 9. Designated Facility Name and Site Address<br><b>Industrial Service Co.</b><br><b>1700 So. Soto St.</b><br><b>Los Angeles, Ca. 9003</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | 10. US EPA ID Number<br><b>CA D 0 9 9 4 5 2 7 0 8</b> |                       | E. State Transporter's ID                                  |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                       |                       | F. Transporter's Phone                                     |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                       |                       | G. State Facility's ID                                     |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                       |                       | H. Facility's Phone<br><b>213 262-9747</b>                 |                                                                 |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 12. Containers                                        |                       | 13. Total Quantity                                         | 14. Unit Wt/Vol                                                 |
| a. <b>Waste Oil N.O.S.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | No. Type                                              |                       |                                                            |                                                                 |
| b. <b>Combustible Liquid N.A. I270</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | 0 0 1 T T 0 1 0 3 1 5 1 0 G                           |                       |                                                            |                                                                 |
| c.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                       |                       |                                                            |                                                                 |
| d.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                       |                       |                                                            |                                                                 |
| J. Additional Descriptions for Materials Listed Above                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | K. Handling Codes for Wastes Listed Above             |                       | I. Waste No.                                               |                                                                 |
| waste oil + water                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | a. <b>ROI</b>                                         |                       | State <b>22I</b>                                           |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | b.                                                    |                       | EPA/Other <b>DOOI</b>                                      |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | c.                                                    |                       | State                                                      |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | d.                                                    |                       | EPA/Other                                                  |                                                                 |
| 15. Special Handling Instructions and Additional Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                       |                       |                                                            |                                                                 |
| Gloves                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                       |                       |                                                            |                                                                 |
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| 17. Transporter 1 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | Printed/Typed Name                                    |                       | Signature                                                  | Month Day Year                                                  |
| 18. Transporter 2 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | Printed/Typed Name                                    |                       | Signature                                                  | Month Day Year                                                  |
| 19. Discrepancy Indication Space                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                       |                       |                                                            |                                                                 |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | Printed/Typed Name                                    |                       | Signature                                                  | Month Day Year                                                  |

88060567

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL SPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

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FACILITY

| UNIFORM HAZARDOUS WASTE MANIFEST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | 1. Generator's US EPA ID No.<br>C A D 9 8 1 4 1 3 1 3 1 |  | Manifest Document No. |  | 2. Page 1 of                                                          |  | Information in the shaded area is not required by Federal law. |  |                    |  |                                   |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------|--|-----------------------|--|-----------------------------------------------------------------------|--|----------------------------------------------------------------|--|--------------------|--|-----------------------------------|--|
| 3. Generator's Name and Mailing Address<br>Mercury Aero Space Fasteners<br>11800 Sherman Way North Hollywood<br>4. Generator's Phone (818) 982-4800 ca 91609                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                         |  |                       |  | A. State Manifest Document Number<br>88060519                         |  |                                                                |  |                    |  |                                   |  |
| 5. Transporter 1 Company Name<br>King Hazardous Waste Co. Inc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                         |  |                       |  | B. State Generator's ID<br>C A D 9 8 1 4 1 3 1 3 1                    |  |                                                                |  |                    |  |                                   |  |
| 6. US EPA ID Number<br>C A L 9 0 0 0 2 7 4 9 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                         |  |                       |  | C. State Transporter's ID<br>2668                                     |  |                                                                |  |                    |  |                                   |  |
| 7. Transporter 2 Company Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                         |  |                       |  | D. Transporter's Phone<br>213/439-8500                                |  |                                                                |  |                    |  |                                   |  |
| 8. US EPA ID Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                         |  |                       |  | E. State Transporter's ID                                             |  |                                                                |  |                    |  |                                   |  |
| 9. Designated Facility Name and Site Address<br>Industrial Service Co.<br>1700 So. Soto St.<br>Los Angeles, Ca. 90023                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                         |  |                       |  | F. Transporter's Phone                                                |  |                                                                |  |                    |  |                                   |  |
| 10. US EPA ID Number<br>C A D 0 9 9 4 5 2 7 0 8                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                         |  |                       |  | G. State Facility's ID                                                |  |                                                                |  |                    |  |                                   |  |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                         |  |                       |  | 12. Containers<br>No. Type                                            |  | 13. Total Quantity                                             |  | 14. Unit<br>Wt/Vol |  | 15. Waste No.                     |  |
| a. Waste Oil N.O.S.<br>Combustible Liquid N.A. 1270                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                         |  |                       |  | 001 T TOP 325 G                                                       |  |                                                                |  |                    |  | State<br>22I<br>EPA/Other<br>D001 |  |
| b.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                         |  |                       |  |                                                                       |  |                                                                |  |                    |  | State<br>EPA/Other                |  |
| c.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                         |  |                       |  |                                                                       |  |                                                                |  |                    |  | State<br>EPA/Other                |  |
| d.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                         |  |                       |  |                                                                       |  |                                                                |  |                    |  | State<br>EPA/Other                |  |
| J. Additional Descriptions for Materials Listed Above<br>waste oil                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                         |  |                       |  | K. Handling Codes for Wastes Listed Above<br>a. RO1<br>b.<br>c.<br>d. |  |                                                                |  |                    |  |                                   |  |
| 15. Special Handling Instructions and Additional Information<br>Gloves                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                         |  |                       |  |                                                                       |  |                                                                |  |                    |  |                                   |  |
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| 17. Transporter 1 Acknowledgement of Receipt of Materials<br>Printed/Typed Name<br>Signature<br>Month Day Year<br>J. Concepcion Carrera<br>01/07/91                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                         |  |                       |  |                                                                       |  |                                                                |  |                    |  |                                   |  |
| 18. Transporter 2 Acknowledgement of Receipt of Materials<br>Printed/Typed Name<br>Signature<br>Month Day Year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                         |  |                       |  |                                                                       |  |                                                                |  |                    |  |                                   |  |
| 19. Discrepancy Indication Space                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                         |  |                       |  |                                                                       |  |                                                                |  |                    |  |                                   |  |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.<br>Printed/Typed Name<br>Signature<br>Month Day Year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                         |  |                       |  |                                                                       |  |                                                                |  |                    |  |                                   |  |

Please print or type. (Form designed for use on elite (12-pitch typewriter).

### Instructions on the Back

88057078

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GENERATOR

TRANSPORTER

FACILITY

| UNIFORM HAZARDOUS WASTE MANIFEST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | 1. Generator's US EPA ID No. |  | Manifest Document No. |  | 2. Page 1 of                                                                 |  | Information in the shaded areas is not required by Federal law. |  |                    |  |                                           |  |  |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------|--|-----------------------|--|------------------------------------------------------------------------------|--|-----------------------------------------------------------------|--|--------------------|--|-------------------------------------------|--|--|--|--|--|
| 3. Generator's Name and Mailing Address<br><b>MERCURY AEROSPACE FASTENERS</b><br>11800 Sherman Way, North Hollywood, CA 91609                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                              |  |                       |  | A. State Manifest Document Number<br><b>88057078</b>                         |  |                                                                 |  |                    |  |                                           |  |  |  |  |  |
| 4. Generator's Phone <b>818 ) 982-4800</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                              |  |                       |  | B. State Generator's ID<br><b>C A D 9 8 1 4 1 3 1 3 1 1</b>                  |  |                                                                 |  |                    |  |                                           |  |  |  |  |  |
| 5. Transporter 1 Company Name<br><b>KING &amp; KING DRAIN OIL SERVICE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                              |  |                       |  | C. State Transporter's ID<br><b>4200</b>                                     |  |                                                                 |  |                    |  |                                           |  |  |  |  |  |
| 6. US EPA ID Number<br><b>C A D 9 8 1 4 2 3 3 2 0</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                              |  |                       |  | D. Transporter's Phone<br><b>213-439-8500</b>                                |  |                                                                 |  |                    |  |                                           |  |  |  |  |  |
| 7. Transporter 2 Company Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                              |  |                       |  | E. State Transporter's ID                                                    |  |                                                                 |  |                    |  |                                           |  |  |  |  |  |
| 8. US EPA ID Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                              |  |                       |  | F. Transporter's Phone                                                       |  |                                                                 |  |                    |  |                                           |  |  |  |  |  |
| 9. Designated Facility Name and Site Address<br><b>PETROLEUM RECYCLING CORPORATION</b><br>1835 E. 29th STREET<br>SIGNAL HILL, CA 90806                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                              |  |                       |  | G. State Facility's ID                                                       |  |                                                                 |  |                    |  |                                           |  |  |  |  |  |
| 10. US EPA ID Number<br><b>C A T 0 8 0 0 1 1 0 5 9</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                              |  |                       |  | H. Facility's Phone<br><b>213-595-6597</b>                                   |  |                                                                 |  |                    |  |                                           |  |  |  |  |  |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                              |  |                       |  | 12. Containers<br>No. Type                                                   |  | 13. Total Quantity                                              |  | 14. Unit<br>Wt/Vol |  | 15. Waste No.                             |  |  |  |  |  |
| a. <b>WASTE OIL N.O.S., COMBUSTIBLE LIQUID NA 1000</b><br><b>1773</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                              |  |                       |  | 0 0 1 T T                                                                    |  | 90390                                                           |  | G                  |  | State <b>223</b><br>EPA/Other <b>0001</b> |  |  |  |  |  |
| b. <b>RECEIVED</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                              |  |                       |  |                                                                              |  |                                                                 |  |                    |  | State<br>EPA/Other                        |  |  |  |  |  |
| c. <b>DEC 7 - 1989</b><br><b>Mercury Aerospace</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                              |  |                       |  |                                                                              |  |                                                                 |  |                    |  | State<br>EPA/Other                        |  |  |  |  |  |
| d.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                              |  |                       |  |                                                                              |  |                                                                 |  |                    |  | State<br>EPA/Other                        |  |  |  |  |  |
| J. Additional Descriptions for Materials Listed Above<br><b>Contaminated with Halogenated Solvents</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                              |  |                       |  | K. Handling Codes for Wastes Listed Above<br>a. <b>R01</b><br>b.<br>c.<br>d. |  |                                                                 |  |                    |  |                                           |  |  |  |  |  |
| 15. Special Handling Instructions and Additional Information<br><b>Gloves</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                              |  |                       |  |                                                                              |  |                                                                 |  |                    |  |                                           |  |  |  |  |  |
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| Printed/Typed Name<br><b>TERRY MASL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                              |  |                       |  | Signature<br><i>[Signature]</i>                                              |  |                                                                 |  |                    |  | Month Day Year<br><b>1 1 3 0 8 9</b>      |  |  |  |  |  |
| 17. Transporter 1 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                              |  |                       |  |                                                                              |  |                                                                 |  |                    |  |                                           |  |  |  |  |  |
| Printed/Typed Name<br><b>CONCEPCION CARRERA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                              |  |                       |  | Signature<br><i>[Signature]</i>                                              |  |                                                                 |  |                    |  | Month Day Year<br><b>1 1 3 0 8 9</b>      |  |  |  |  |  |
| 18. Transporter 2 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                              |  |                       |  |                                                                              |  |                                                                 |  |                    |  |                                           |  |  |  |  |  |
| Printed/Typed Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                              |  |                       |  | Signature                                                                    |  |                                                                 |  |                    |  | Month Day Year                            |  |  |  |  |  |
| 19. Discrepancy Indication Space                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                              |  |                       |  |                                                                              |  |                                                                 |  |                    |  |                                           |  |  |  |  |  |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                              |  |                       |  |                                                                              |  |                                                                 |  |                    |  |                                           |  |  |  |  |  |
| Printed/Typed Name<br><i>[Signature]</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                              |  |                       |  | Signature<br><i>[Signature]</i>                                              |  |                                                                 |  |                    |  | Month Day Year<br><b>1 1 3 0 8 9</b>      |  |  |  |  |  |

88057078

**UNIFORM HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No

Manifest  
Document No

2. Page 1

Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

**MERCURY AEROSPACE FASTENERS****11800 Sherman Way, North Hollywood, CA 91311**4. Generator's Phone **818 982-4800**

5. Transporter 1 Company Name

**King & King Drain Oil Services**

6. US EPA ID Number

**CAD981413131**

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

**PETROLEUM RECYCLING CORPORATION****1835 E. 29th St., Signal Hill, CA 90806**

10. US EPA ID Number

**CAT080011059**

A. State Manifest Document Number

**88059613**

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

**213-595-6597**

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No.

Type

13. Total  
Quantity14. Unit  
Wt/Vol

1. Waste No.

a.

**Waste Oil No. 0.S., Combustible Liquid NA 1993****001****FF****G**

State

EPA/Other

**223**

b.

State

EPA/Other

**0001**

c.

State

EPA/Other

d.

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

**Contaminated with Halogenated Solvents**

K. Handling Codes for Wastes Listed Above

a.

**R01**

b.

c.

d.

15. Special Handling Instructions and Additional Information

**Gloves**

16.

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

Signature

Month Day Year

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

HD 350B

88059613

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

Please print or type. (Form designed for use on elite (12-pitch typewriter)

Information in the shaded areas is not required by Federal law.

Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No

Manifest Document No

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

MERCURY AEROSPACE FASTENERS  
11800 Sherman Way, North Hollywood, CA 91609

4. Generator's Phone (818) 982-4800

A. State Manifest Document Number

88059614

B. State Generator's ID

CAD9811411311311

5. Transporter 1 Company Name

6. US EPA ID Number

C. State Transporter's ID

2668

King Hazardous Waste

CAL0000027490

D. Transporter's Phone 213-438-8500

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

G. State Facility's ID

PRC 1835 E. 29th St.,  
Signal Hill CA 90806

H. Facility's Phone

KATTO 8100111039 213-595-6597

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

I. Waste No.

a. Waste oil N.O.S.  
Combustible Liquid N.A. 1993

0 0 1 T T 388 0 G

State 223

EPA/Other D001

b. above information provided for the purpose of the manifest

State

EPA/Other

c. received from the generator and is being transported to the facility for treatment, storage, or disposal

State

EPA/Other

d. PETROLEUM RECYCLATION

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

By: Contaminated with Halogenated Solvents

K. Handling Codes for Wastes Listed Above

a. R.O.I.

b. 100

c. 100

d. 100

15. Special Handling Instructions and Additional Information

Rubber gloves & glasses

16.

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

Signature

Month Day Year

88059614  
IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

# UNIFORM HAZARDOUS WASTE MANIFEST

Generator's US EPA ID No. **6 A D 9 8 1 4 1 3 1 3 1** Manifest Document No. **1**

2 Page 1 of Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address  
**MERCURY AEROSPACE FASTENERS**  
**11800 Sherman Way, North Hollywood CA 91609**

A. State Manifest Document Number  
**88059615**

4. Generator's Phone (818) 982-28000

B. State Generator's ID  
**C A D 9 8 1 4 1 3 1 3 1**

5. Transporter 1 Company Name **King Hazardous Waste Co., Inc.** 6. US EPA ID Number **Q A L Q Q Q 02 7 4 9 0**

C. State Transporter's ID **2668**  
D. Transporter's Phone **(213) 439-8500**

7 Transporter 2 Company Name 8. US EPA ID Number

E. State Transporter's ID  
F. Transporter's Phone

9. Designated Facility Name and Site Address  
**PETROLEUM RECYCLING CORP.**  
**1835 E. 29th St.**  
**Signal Hill, CA 90806**

10. US EPA ID Number  
**1 C A T 08 0 0 1 1 0 5 9**  
G. State Facility's ID  
**(213) 595-6597**  
H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol I. Waste No.

a. **Wasta Oil N.O.S., Combustible liquid RA 1993**

**Q Q 1 T T** **G** State **223**  
EPA/Other **D001**

b. **Locally generated waste from the above facility, used with the provided equipment and unit to 400-261.2, and recycled in accordance with the provisions of 40 CFR Part 261.**

State  
EPA/Other  
State  
EPA/Other  
State  
EPA/Other

**PETROLEUM RECYCLING CORPORATION**

J. Additional Descriptions for Materials Listed Above

**Contaminated with: Halogenated Solvents**

K. Handling Codes for Wastes Listed Above

a. **R01** b.  
c. d.

15. Special Handling Instructions and Additional Information

**Gloves**

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.  
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name Signature Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name Signature Month Day Year  
**CONCEPCION CABRERA** **10/20/90**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Signature Month Day Year

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL REUSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

FACILITY

Please print or type. (Form designed for use on elite (12-pitch typewriter).

## Instructions on the Back

Toxic Substances Control Division  
Sacramento, California

| UNIFORM HAZARDOUS WASTE MANIFEST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 1. Generator's US EPA ID No.<br>C A D 9 8 1 4 1 1 3 1 1 3 1 1                      | Manifest Document No.                                              | 2. Page 1 of 1                    | Information in the shaded areas is not required by Federal law. |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------|--------------------------------------------------------------------|-----------------------------------|-----------------------------------------------------------------|
| 3. Generator's Name and Mailing Address<br><b>MERCURY AEROSPACE FASTENERS</b><br>11800 Sherman Way, North Hollywood, CA 90609                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                    | A. State Manifest Document Number<br><b>88059616</b>               |                                   |                                                                 |
| 4. Generator's Phone (818) 982-4800<br>Mercury Aerospace                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                    | B. State Generator's ID<br>C A D 9 8 1 4 1 1 3 1 1 3 1 1           |                                   |                                                                 |
| 5. Transporter 1 Company Name<br><b>King Hazardous Waste, Co.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                    | C. State Transporter's ID<br>D. Transporter's Phone (213) 439-8500 |                                   |                                                                 |
| 6. US EPA ID Number<br>C A L 0 0 0 0 0 2 7 4 9 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                    | E. State Transporter's ID                                          |                                   |                                                                 |
| 7. Transporter 2 Company Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                    | F. Transporter's Phone                                             |                                   |                                                                 |
| 8. US EPA ID Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                    | G. State Facility's ID                                             |                                   |                                                                 |
| 9. Designated Facility Name and Site Address<br><b>PETROLEUM RECYCLING CORP.</b><br>1835 E. 29th St.<br>Signal Hill, CA 90806                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                    | H. Facility's Phone<br>(213) 595-6597                              |                                   |                                                                 |
| 10. US EPA ID Number<br>C A A T 0 8 0 0 1 1 0 5 9                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                    | I. Waste No. 0074                                                  |                                   |                                                                 |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 12. Containers<br>No. Type                                                         | 13. Total Quantity                                                 | 14. Unit<br>Wt/Vol                | 15. Waste No.                                                   |
| a. <b>Waste Oil N.O.S. Combustible liquid NA 1993</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | 0 0 0 T                                                                            | 100                                                                | G                                 | State 223<br>EPA/Other D001                                     |
| b. above, also with the provisions of 40 CFR 261.31                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                    |                                                                    |                                   | State<br>EPA/Other                                              |
| c. the provisions of 40 CFR 261.31                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                    |                                                                    |                                   | State<br>EPA/Other                                              |
| d. PETROLEUM RECYCLING CORPORATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                    |                                                                    |                                   | State<br>EPA/Other                                              |
| J. Additional Descriptions for Materials Listed Above<br><b>Contaminated with Halogenated Solvents</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | K. Handling Codes for Wastes Listed Above<br>a. R07<br>b. 27<br>c. FM 9<br>d. HILL |                                                                    |                                   |                                                                 |
| 15. Special Handling Instructions and Additional Information<br><b>Gloves</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                    |                                                                    |                                   |                                                                 |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.<br>If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. |  |                                                                                    |                                                                    |                                   |                                                                 |
| Printed/Typed Name<br><b>Robert M. USL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | Signature<br><i>[Signature]</i>                                                    |                                                                    | Month Day Year<br><b>08 08 90</b> |                                                                 |
| 17. Transporter 1 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Signature<br><i>[Signature]</i>                                                    |                                                                    | Month Day Year<br><b>08 08 90</b> |                                                                 |
| Printed/Typed Name<br><b>J. CONCEPCION CARRERA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Signature<br><i>[Signature]</i>                                                    |                                                                    | Month Day Year<br><b>08 08 90</b> |                                                                 |
| 18. Transporter 2 Acknowledgement of Receipt of Materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Signature<br><i>[Signature]</i>                                                    |                                                                    | Month Day Year<br><b>08 08 90</b> |                                                                 |
| Printed/Typed Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Signature                                                                          |                                                                    | Month Day Year                    |                                                                 |
| 19. Discrepancy Indication Space                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                    |                                                                    |                                   |                                                                 |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                    |                                                                    |                                   |                                                                 |
| Printed/Typed Name<br><b>Loren B. [Signature]</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | Signature<br><i>[Signature]</i>                                                    |                                                                    | Month Day Year<br><b>08 08 90</b> |                                                                 |

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

Do Not Write Below This Line

Yellow: TSDf SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

**HAZARDOUS WASTE GENERATOR FEE AND  
WASTE REPORTING SURCHARGE FEE RETURN**Document **(i)**

|      |     |    |
|------|-----|----|
| REG  | RR  | PR |
| TR   | AUD | NR |
| REF  | QD  | PI |
| FILE |     |    |
| PM   |     |    |

DUE ON OR BEFORE 01/31/91 FOR JAN - DEC 1990

Mail To:

9190

HG HQ 36-022942

STATE BOARD OF EQUALIZATION  
EXCISE TAX DIVISION  
P.O. BOX 647  
SACRAMENTO, CA. 95803-0647

MERCURY AEROSPACE FASTENERS  
MERCURY AEROSPACE INC  
PO BOX 9759  
NORTH HOLLYWOOD, CA 91609

RECEIVED

JAN 11 1991

READ INSTRUCTIONS  
BEFORE PREPARING

Make Changes If Name  
or Address is Incorrect

CAD981413131

11800 SHERMAN WAY NORTH HOLLYWOOD

| A<br>CLASSIFICATION OF GENERATING SITES                                                                                                                            | B<br>NUMBER<br>OF SITES | C<br>AMOUNT OF<br>FEES | D<br>TOTAL FEES<br>DUE<br>(Col B x C) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------|---------------------------------------|
| 1. Generators which generate less than 5 tons of hazardous waste during the calendar year or portion thereof.                                                      |                         | 0.00                   |                                       |
| 2. Generators which generate an amount equal to or more than 5 tons, but less than 25 tons, of hazardous waste during the calendar year or portion thereof.        |                         | 132.00                 |                                       |
| 3. Generators which generate an amount equal to or more than 25 tons, but less than 50 tons, of hazardous waste during the calendar year or portion thereof.       | 1                       | 1,059.00               | 1059.00                               |
| 4. Generators which generate an amount equal to or more than 50 tons, but less than 250 tons, of hazardous waste during the calendar year or portion thereof.      |                         | 2,647.00               |                                       |
| 5. Generators which generate an amount equal to or more than 250 tons, but less than 500 tons, of hazardous waste during the calendar year or portion thereof.     |                         | 13,235.00              |                                       |
| 6. Generators which generate an amount equal to or more than 500 tons, but less than 1,000 tons, of hazardous waste during the calendar year or portion thereof.   |                         | 26,470.00              |                                       |
| 7. Generators which generate an amount equal to or more than 1,000 tons, but less than 2,000 tons, of hazardous waste during the calendar year or portion thereof. |                         | 39,705.00              |                                       |
| 8. Generators which generate an amount equal to or more than 2,000 tons of hazardous waste during the calendar year or portion thereof.                            |                         | 52,940.00              |                                       |
| 9. Total amount of fees. (Add amounts in Column D, Lines 1 thru 8)                                                                                                 |                         |                        | \$ 1059.00                            |
| 10. See instructions for credit for local fees.                                                                                                                    |                         |                        | -\$                                   |
| 11. Total amount of fees due.<br>(Subtract Line 10 from Line 9. If Line 11 is less than zero, enter zero.)                                                         |                         |                        | \$ 1059.00                            |
| 12. Penalty of 10% (.10) if payment is made after due date shown above.                                                                                            |                         | Penalty                | \$                                    |
| 13. INTEREST OF 14% PER ANNUM (0.011667 PER MONTH)<br>IS DUE IF PAYMENT IS MADE AFTER THE DUE DATE.                                                                |                         | Interest               | \$                                    |
| 14. TOTAL AMOUNT DUE AND PAYABLE. (Add lines 11, 12, 13)                                                                                                           |                         |                        | \$ 1059.00                            |

I hereby certify that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

PRINT/TYPE NAME AND TITLE

SIGNATURE

PHONE NUMBER

DATE

MAKE CHECK OR MONEY ORDER PAYABLE TO STATE BOARD OF EQUALIZATION.

Always Write Your Account Number on Your Check or Money Order. Make a Copy of This Document For Your Records.

RAN 14

JAN 11 1991

|      |     |    |
|------|-----|----|
| REG  | RR  | PR |
| TR   | AUD | NR |
| REF  | QD  | PI |
| FILE |     |    |
| PM   |     |    |

**HAZARDOUS WASTE TAX RETURN**

DUE ON OR BEFORE 01/31/91 FOR JUL - DEC 1990

Mail To:

7290

HA HQ 36-022942

STATE BOARD OF EQUALIZATION  
EXCISE TAX DIVISION  
P.O. BOX 647  
SACRAMENTO, CA. 95803-0647

MERCURY AEROSPACE FASTENERS  
MERCURY AEROSPACE INC  
PO BOX 9759  
NORTH HOLLYWOOD CA 91609

READ INSTRUCTIONS  
BEFORE PREPARING

Make Changes If Name  
or Address is Incorrect

CAD981413131

| CATEGORIES<br>(DEFINITIONS ENCLOSED)                                                                       | A<br>Total Tonnage<br>Disposed of<br>By Category | B<br>Taxable Tonnage<br>(round up to<br>whole ton) | C<br>Rate of Tax | D<br>Amount of Tax<br>(col. B x C) |
|------------------------------------------------------------------------------------------------------------|--------------------------------------------------|----------------------------------------------------|------------------|------------------------------------|
| Recycled (Excludes used oil removed from a motor<br>0a. vehicle and subsequently recycled)                 | 8.36                                             |                                                    | 0.00             |                                    |
| 0b. Out of State                                                                                           |                                                  |                                                    | 21.00            |                                    |
| Non-RCRA Regulated (Generally includes asbestos,<br>1. petroleum based waste and hazardous shredder waste) | 5.43                                             | 6                                                  | 13.13            | 78.78                              |
| 2. Mining Waste                                                                                            |                                                  |                                                    | 13.13            |                                    |
| 3a. Extremely Hazardous Surface Impounded                                                                  |                                                  |                                                    | 105.00           |                                    |
| 3b. Extremely Hazardous Not Surface Impounded                                                              |                                                  |                                                    | 105.00           |                                    |
| 4a. Restricted Waste Surface Impounded                                                                     |                                                  |                                                    | 105.00           |                                    |
| 4b. Restricted Waste Not Surface Impounded                                                                 |                                                  |                                                    | 105.00           |                                    |
| 5a. Other (See category definitions)                                                                       |                                                  |                                                    | 2.63             |                                    |
| 5b. Other (See category definitions)                                                                       |                                                  |                                                    | 2.63             |                                    |
| Hazardous Waste Landfilled (Generally excludes<br>6a. asbestos and petroleum based waste - see Line 1)     |                                                  |                                                    | 52.50            |                                    |
| 6b. Hazardous Waste Landfirmed                                                                             |                                                  |                                                    | 52.50            |                                    |
| 6c. Hazardous Waste Injection Well                                                                         |                                                  |                                                    | 52.50            |                                    |
| 6d. Hazardous Waste Surface Impounded                                                                      |                                                  |                                                    | 52.50            |                                    |
| Double Lined Surface Impounded (RESTRICTED<br>8. Category - See category definitions)                      |                                                  |                                                    | 5.25             |                                    |
| 9. Total Tax (add column D Lines 0b through 8)                                                             |                                                  |                                                    |                  | 78.78                              |
| 10. Penalty of 10% (.10) if payment is made after due date shown above.                                    |                                                  |                                                    | Penalty          |                                    |
| 11. INTEREST OF 14% PER ANNUM (0.011667 PER MONTH)<br>IS DUE IF PAYMENT IS MADE AFTER THE DUE DATE.        |                                                  |                                                    | Interest         |                                    |
| 12. TOTAL AMOUNT DUE AND PAYABLE (Add Lines 9, 10, 11)                                                     |                                                  |                                                    |                  | 78.78                              |

I hereby certify that this return, including any accompanying schedules and statements, has been  
examined by me and to the best of my knowledge and belief is a true, correct and complete return.

PRINT/TYPE NAME AND TITLE

SIGNATURE

PHONE NUMBER

DATE

JEROME A. FLAMENT, Adm Manager

(818) 982-4800

1/31/91

MAKE CHECK OR MONEY ORDER PAYABLE TO STATE BOARD OF EQUALIZATION.

Always Write Your Account Number on Your Check or Money Order. Make a Copy For Your Records.

JUL 9 - 1990

BOARD USE ONLY

|      |     |    |
|------|-----|----|
| REG  | RR  | PR |
| TR   | AUD | NR |
| REF  | QD  | PI |
| FILE |     |    |
| PM   |     |    |

READ INSTRUCTIONS  
BEFORE PREPARINGMake Changes If Name  
or Address is IncorrectBT-401-3 FRONT  
(01/90)

## HAZARDOUS WASTE TAX RETURN

DUE ON OR BEFORE 07/31/90 FOR JAN - JUN 1990

Mail To:

7190

HA HQ 36-022942

STATE BOARD OF EQUALIZATION  
EXCISE TAX DIVISION  
P.O. BOX 647  
SACRAMENTO, CA. 95803-0647MERCURY AEROSPACE FASTENERS  
MERCURY AEROSPACE INC  
PO BOX 9759

NORTH HOLLYWOOD, CA 91609

paid on check # 3324 on 7/31/90

CAD981413131

11800 SHERMAN WAY, NORTH HOLLYWOOD

| CATEGORIES<br>(DEFINITIONS ENCLOSED)                                                                       | A<br>Total Tonnage<br>Disposed of<br>By Category | B<br>Taxable Tonnage<br>(round up to<br>whole ton) | C<br>Rate of Tax | D<br>Amount of T.<br>(col. B x C) |
|------------------------------------------------------------------------------------------------------------|--------------------------------------------------|----------------------------------------------------|------------------|-----------------------------------|
| Recycled (Excludes used oil removed from a motor<br>0a. vehicle and subsequently recycled)                 | 16.11                                            |                                                    | 0.00             |                                   |
| 0b. Out of State                                                                                           |                                                  |                                                    | 18.38            |                                   |
| Non-RCRA Regulated (Generally includes asbestos,<br>1. petroleum based waste and hazardous shredder waste) | 9.40                                             | 10.00                                              | 13.13            | 131.30                            |
| 2. Mining Waste                                                                                            |                                                  |                                                    | 13.13            |                                   |
| 3a. Extremely Hazardous Surface Impounded                                                                  |                                                  |                                                    | 105.00           |                                   |
| 3b. Extremely Hazardous Not Surface Impounded                                                              |                                                  |                                                    | 105.00           |                                   |
| 4a. Restricted Waste Surface Impounded                                                                     |                                                  |                                                    | 105.00           |                                   |
| 4b. Restricted Waste Not Surface Impounded                                                                 |                                                  |                                                    | 105.00           |                                   |
| 5a. Other (See category definitions)                                                                       |                                                  |                                                    | 2.63             |                                   |
| 5b. Other (See category definitions)                                                                       |                                                  |                                                    | 2.63             |                                   |
| Hazardous Waste Landfilled (Generally excludes<br>6a. asbestos and petroleum based waste - see Line 1)     |                                                  |                                                    | 52.50            |                                   |
| 6b. Hazardous Waste Landfarmed                                                                             |                                                  |                                                    | 52.50            |                                   |
| 6c. Hazardous Waste Injection Well                                                                         |                                                  |                                                    | 52.50            |                                   |
| 6d. Hazardous Waste Surface Impounded                                                                      |                                                  |                                                    | 52.50            |                                   |
| Double Lined Surface Impounded (RESTRICTED<br>8. Category - See category definitions)                      |                                                  |                                                    | 5.25             |                                   |
| 9. Total Tax (add column D Lines 0b through 8)                                                             |                                                  |                                                    |                  | 131.30                            |
| 10. Penalty of 10% (.10) if payment is made after due date shown above.                                    |                                                  |                                                    | Penalty          |                                   |
| 11. INTEREST OF 14% PER ANNUM (0.011667 PER MONTH)<br>IS DUE IF PAYMENT IS MADE AFTER THE DUE DATE.        |                                                  |                                                    | Interest         |                                   |
| 12. TOTAL AMOUNT DUE AND PAYABLE (Add Lines 9, 10, 11)                                                     |                                                  |                                                    |                  | 131.30                            |

I hereby certify that this return, including any accompanying schedules and statements, has been  
examined by me and to the best of my knowledge and belief is a true, correct and complete return.

PRINT/TYPE NAME AND TITLE

J. FLAMENT

ADMINISTRATIVE MANAGER

SIGNATURE

PHONE NUMBER

(818) 982 4800

DATE

07-31-90

MAKE CHECK OR MONEY ORDER PAYABLE TO STATE BOARD OF EQUALIZATION.

Always Write Your Account Number on Your Check or Money Order. Make a Copy For Your Records.

STATE OF  
CALIFORNIAP.O. BOX 647  
SACRAMENTO, CA 95803-0647BOARD OF EQUALIZATION  
EXCISE TAX DIVISION

RE-100-1 FRONT

## HAZARDOUS WASTE TAX RETURN

DUE ON OR BEFORE

01/31/90

FOR

JAN- DEC 89

Mail To:

03761

19998

7289

HA HQ 36-022942

STATE BOARD OF EQUALIZATION  
EXCISE TAX DIVISION

P.O. BOX 647

SACRAMENTO, CA. 95803-0647

11800 SHERMAN WAY  
MERCURY AEROSPACE FASTENERS  
MERCURY AEROSPACE INC  
PO BOX 9759  
NORTH HOLLYWOOD

CA 91609

| BOARD USE ONLY |     |    |
|----------------|-----|----|
| REG            | RR  | PR |
| TR             | AUD | NR |
| REF            | QD  | PI |
| FILE           |     |    |
| PA1            |     |    |

READ INSTRUCTIONS  
BEFORE PREPARINGMake Changes If Name  
or Address is Incorrect

CAD981113131

| CATEGORIES<br>(DEFINITIONS ENCLOSED)                                                                       | A<br>Total Tonnage<br>Disposed of<br>By Category | B<br>Taxable Tonnage<br>(round up to<br>whole ton) | C<br>Rate of Tax | D<br>Amount of Tax<br>(col. B x C) |
|------------------------------------------------------------------------------------------------------------|--------------------------------------------------|----------------------------------------------------|------------------|------------------------------------|
| Recycled (Excludes used oil removed from a motor<br>0a. vehicle and subsequently recycled)                 | 17.47                                            |                                                    |                  | 0.00                               |
| 0b. Out of State                                                                                           |                                                  |                                                    |                  | 18.38                              |
| Non-RCRA Regulated (Generally includes asbestos,<br>1. petroleum based waste and hazardous shredder waste) | 12.55                                            | 13                                                 | 170.69           | 13.13                              |
| 2. Mining Waste                                                                                            |                                                  |                                                    |                  | 13.13                              |
| 3a. Extremely Hazardous Surface Impounded                                                                  |                                                  |                                                    |                  | 105.00                             |
| 3b. Extremely Hazardous Not Surface Impounded                                                              |                                                  |                                                    |                  | 105.00                             |
| 4a. Restricted Waste Surface Impounded                                                                     |                                                  |                                                    |                  | 105.00                             |
| 4b. Restricted Waste Not Surface Impounded                                                                 |                                                  |                                                    |                  | 105.00                             |
| 5a. Other (See category definitions)                                                                       |                                                  |                                                    |                  | 2.63                               |
| 5b. Other (See category definitions)                                                                       |                                                  |                                                    |                  | 2.63                               |
| Hazardous Waste Landfilled (Generally excludes<br>6a. asbestos and petroleum based waste - see Line 1)     |                                                  |                                                    |                  | 52.50                              |
| 6b. Hazardous Waste Landfarmed                                                                             |                                                  |                                                    |                  | 52.50                              |
| 6c. Hazardous Waste Injection Well                                                                         |                                                  |                                                    |                  | 52.50                              |
| 6d. Hazardous Waste Surface Impounded                                                                      |                                                  |                                                    |                  | 52.50                              |
| Double Lined Surface Impounded (RESTRICTED<br>8. Category - See category definitions)                      |                                                  |                                                    |                  | 5.25                               |
| 9. Total Tax (add column D Lines 0b through 8)                                                             |                                                  |                                                    |                  | 170.69                             |
| 10. Penalty of 10% (.10) if payment is made after due date shown above.                                    |                                                  |                                                    | Penalty          |                                    |
| 11. INTEREST OF 14% PER ANNUM (0.011670% PER MONTH)<br>IS DUE IF MADE AFTER THE DUE DATE.                  |                                                  |                                                    | Interest         |                                    |
| 12. TOTAL AMOUNT DUE AND PAYABLE (Add Lines 9, 10, 11)                                                     |                                                  |                                                    |                  | 170.69                             |

I hereby certify that this return, including any accompanying schedules and statements, has been  
examined by me and to the best of my knowledge and belief is a true, correct and complete return.

PRINT TYPE NAME AND TITLE

SIGNATURE

PHONE NUMBER

DATE

Jerome A. Flament- Administrative Manager

(818) 982-4800

1/30/90

MAKE CHECK OR MONEY ORDER PAYABLE TO STATE BOARD OF EQUALIZATION.  
Always Write Your Account Number on Your Check or Money Order.

SACRAMENTO, CA 95803-0647

HAZARDOUS WASTE CONTROL ACT

## NOTICE OF GENERATORS FEE

DUE ON OR BEFORE **01/31/89**

FOR CALENDAR YEAR

**JAN - DEC 88****03761 19998 9188****GF HQ 36-022942**

Mail to:

BOARD OF EQUALIZATION  
EXCISE TAX UNIT  
P.O. BOX 647  
SACRAMENTO, CA 95803-0647  
(916) 739-2582

**11800 SHERMAN WAY  
MERCURY AEROSPACE FASTENERS  
MERCURY AEROSPACE INC  
PO BOX 9759  
NORTH HOLLYWOOD CA 91609**

Read Instructions  
Before Preparing

**CAD981413131**

Make Changes Above  
Name or Address Incorrect

| CLASSIFICATION OF GENERATING SITES                                                                                                                                                                                                        | NUMBER OF SITES | AMOUNT OF FEE   | TOTAL FEES DUE (Col B x C) |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------|----------------------------|
| 1. Generators which generate less than 5 tons of hazardous waste during the calendar year or portion thereof.                                                                                                                             |                 | <b>0.00</b>     |                            |
| 2. Generators which generate an amount equal to or more than 5 tons, but less than 25 tons, of hazardous waste during the calendar year or portion thereof.                                                                               | <b>1</b>        | <b>242.50</b>   | <b>242.50</b>              |
| 3. Generators which generate an amount equal to or more than 25 tons, but less than 50 tons, of hazardous waste during the calendar year or portion thereof.                                                                              |                 | <b>1212.50</b>  |                            |
| 4. Generators which generate an amount equal to or more than 50 tons, but less than 250 tons, of hazardous waste during the calendar year or portion thereof.                                                                             |                 | <b>2425.00</b>  |                            |
| 5. Generators which generate an amount equal to or more than 250 tons, but less than 500 tons, of hazardous waste during the calendar year or portion thereof.                                                                            |                 | <b>12125.00</b> |                            |
| 6. Generators which generate an amount equal to or more than 500 tons, but less than 1,000 tons, of hazardous waste during the calendar year or portion thereof.                                                                          |                 | <b>24250.00</b> |                            |
| 7. Generators which generate an amount equal to or more than 1,000 tons, but less than 2,000 tons, of hazardous waste during the calendar year or portion thereof.                                                                        |                 | <b>36375.00</b> |                            |
| 8. Generators which generate an amount equal to or more than 2,000 tons of hazardous waste during the calendar year or portion thereof.                                                                                                   |                 | <b>48500.00</b> |                            |
| 9. Total amount of fees. (Add amounts in Column D, lines 1 thru 8)                                                                                                                                                                        |                 |                 | <b>\$ 242.50</b>           |
| 10. Credit for local fees: Subtract a fee paid during the preceding calendar year for a local hazardous waste management program conducted by a local agency pursuant to a memorandum of understanding with the Dept. of Health Services. |                 |                 | <b>\$ -</b>                |
| 11. Total amount of fees due. (Subtract line 10 from line 9)                                                                                                                                                                              |                 |                 | <b>\$ 242.50</b>           |
| 12. Penalty of 10% (.10) if payment is after the due date shown above.                                                                                                                                                                    |                 | PENALTY         | <b>\$ 24.25</b>            |
| 13. INTEREST OF 14% PER ANNUM (1.167000% PER MONTH) IS DUE IF MADE AFTER THE DUE DATE.                                                                                                                                                    |                 | INTEREST        | <b>\$ 2.83</b>             |
| 14. TOTAL AMOUNT DUE AND PAYABLE. (Add lines 11, 12 and 13)                                                                                                                                                                               |                 |                 | <b>\$ 269.58</b>           |

I hereby certify that this notice, including any accompanying statements or schedules are true and correct to the best of my knowledge and belief.

SIGNATURE  
AND TITLE

PLANT MANAGER

PHONE (818) 982-4800

MAKE CHECK OR MONEY ORDER PAYABLE TO STATE BOARD OF EQUALIZATION  
Always Write Your Account Number on Your Check or Money Order

(FE

01/31/88

FOR

JUL - DEC 88

03761 1998 7282

HA HQ 36-022942

Mail to:

STATE BOARD OF EQUALIZATION  
EXCISE TAX UNIT  
P. O. BOX 647  
SACRAMENTO CA 95803-0647

11800 SHERMAN WAY  
MERCURY AEROSPACE FASTENERS  
MERCURY AEROSPACE INC  
PO BOX 9759  
NORTH HOLLYWOOD

CA 91699

READ INSTRUCTIONS  
BEFORE PREPARING

CAD981413131

Make Changes Above  
Name or Address Incorr

| Categories<br>(Definitions Enclosed)                                                                | A<br>Total Tonnage Disposed<br>of By Category | B<br>Taxable Tonnage<br>(round up to<br>whole ton) | C<br>Rate of Tax | D<br>Amount of Tax<br>(Col. B x C) |
|-----------------------------------------------------------------------------------------------------|-----------------------------------------------|----------------------------------------------------|------------------|------------------------------------|
| 0a. Recycled                                                                                        | 8.97                                          |                                                    | 6.00             |                                    |
| 0b. Disposed Out of State                                                                           |                                               |                                                    | 32.18            |                                    |
| 1. RCRA Exempt (Generally includes asbestos and petroleum based waste)                              | 8.8                                           | 9                                                  | 16.09            | 144.81                             |
| 2. Mining Wastes                                                                                    |                                               |                                                    | 16.09            |                                    |
| 3a. Extremely Hazardous Surface Impounded                                                           |                                               |                                                    | 128.70           |                                    |
| 3b. Extremely Hazardous Not Surface Impounded                                                       |                                               |                                                    | 128.70           |                                    |
| 4a. Restricted Wastes Surface Impounded                                                             |                                               |                                                    | 128.70           |                                    |
| 4b. Restricted Wastes Not Surface Impounded                                                         |                                               |                                                    | 128.70           |                                    |
| 5. Other. (See category definitions)                                                                |                                               |                                                    | 3.22             |                                    |
| 6a. Hazardous Waste Landfilled (Generally excludes asbestos and petroleum based waste - See line 1) |                                               |                                                    | 64.35            |                                    |
| 6b. Hazardous Waste Landfirmed                                                                      |                                               |                                                    | 64.35            |                                    |
| 6c. Hazardous Waste Injection Well                                                                  |                                               |                                                    | 64.35            |                                    |
| 6d. Hazardous Waste Surface Impounded                                                               |                                               |                                                    | 64.35            |                                    |
| 7. Shredder Waste                                                                                   |                                               |                                                    | 16.09            |                                    |
| 8. Double Lined Surface Impoundment (Restricted Category - See category definitions)                |                                               |                                                    | 6.44             |                                    |
| 9. Total Tax (ad lines 1D through 8D)                                                               |                                               |                                                    |                  | \$ 144.81                          |
| 10. Penalty of 10% (.10) if payment is made after the due date shown above.                         |                                               |                                                    | Penalty          | 14.48                              |
| 11. INTEREST OF 14% PER ANNUM (1.167000% PER MONTH) IS DUE IF MADE AFTER THE DUE DATE.              |                                               |                                                    | Interest         | 1.69                               |
| 12. TOTAL AMOUNT DUE AND PAYABLE                                                                    |                                               |                                                    |                  | \$ 160.98                          |

I hereby certify that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

SIGNATURE  
AND TITLE

PLANT MANAGER

( 818 ) 982-4800  
PHONE NUMBER

MAKE CHECK OR MONEY ORDER PAYABLE TO STATE BOARD OF EQUALIZATION  
Always Write Your Account Number on Your Check or Money Order

RT-401-J (SIF)  
BT-401-J (SIF)  
REV. 15 (7-87)

STATE OF  
CALIFORNIA

P. O. BOX 647  
SACRAMENTO CA 95803-0647

DUPLICATE — KEEP FOR YOUR RECORDS

BOARD OF EQUALIZATION  
HAZARDOUS WASTE CONTROL ACCOUNT  
(FE)

# HAZARDOUS WASTE TAX RETURN

**DUE ON OR BEFORE** 07/15/88 **FOR** JAN - JUN 88

03761 19998 7188 HA HQ 36-022342

Mail to:

STATE BOARD OF EQUALIZATION  
EXCISE TAX UNIT  
P. O. BOX 647  
SACRAMENTO CA 95803-0647

11800 SHERMAN WAY  
MERCURY AEROSPACE FASTENERS  
MERCURY AEROSPACE INC  
PO BOX 9759  
NORTH HOLLYWOOD CA 91609

READ INSTRUCTIONS  
BEFORE PREPARING

CAD981413131

Make Changes Above  
Name or Address Incorr

| Categories<br>(Definitions Enclosed)                                                                | A<br>Total Tonnage Disposed<br>of By Category | B<br>Taxable Tonnage<br>(round up to<br>whole ton) | C<br>Rate of Tax | D<br>Amount of Tax<br>(Col. B x C) |
|-----------------------------------------------------------------------------------------------------|-----------------------------------------------|----------------------------------------------------|------------------|------------------------------------|
| 0a. Recycled                                                                                        | 8.445                                         |                                                    | 0.00             |                                    |
| 0b. Disposed Out of State                                                                           |                                               |                                                    | 18.07            |                                    |
| 1. RCRA Exempt (Generally includes asbestos and petroleum based waste)                              |                                               |                                                    | 9.03             |                                    |
| 2. Mining Wastes                                                                                    |                                               |                                                    | 9.03             |                                    |
| 3a. Extremely Hazardous Surface Impounded                                                           |                                               |                                                    | 72.26            |                                    |
| 3b. Extremely Hazardous Not Surface Impounded                                                       |                                               |                                                    | 72.26            |                                    |
| 4a. Restricted Wastes Surface Impounded                                                             |                                               |                                                    | 72.26            |                                    |
| 4b. Restricted Wastes Not Surface Impounded                                                         |                                               |                                                    | 72.26            |                                    |
| 5. Other. (See category definitions)                                                                | A                                             | A                                                  | 1.91             | A                                  |
|                                                                                                     | B                                             | B                                                  | 1.91             | B                                  |
| 6a. Hazardous Waste Landfilled (Generally excludes asbestos and petroleum based waste - See line 1) |                                               |                                                    | 36.13            |                                    |
| 6b. Hazardous Waste Landfarmed                                                                      |                                               |                                                    | 36.13            |                                    |
| 6c. Hazardous Waste Injection Well                                                                  |                                               |                                                    | 36.13            |                                    |
| 6d. Hazardous Waste Surface Impounded                                                               |                                               |                                                    | 36.13            |                                    |
| 7. Shredder Waste                                                                                   |                                               |                                                    | 9.03             |                                    |
| 8. Double Lined Surface Impoundment (Restricted Category - See category definitions)                |                                               |                                                    | 3.61             |                                    |
| 9. Total Tax (ad lines 1D through 8D)                                                               |                                               |                                                    |                  | \$ 0.00                            |
| 10. Penalty of 10% (.10) if payment is made after the due date shown above.                         |                                               |                                                    | Penalty          |                                    |
| INTEREST OF 13% PER ANNUM (0.010830% PER MONTH)                                                     |                                               |                                                    |                  |                                    |
| 11. IS DUE IF MADE AFTER THE DUE DATE.                                                              |                                               |                                                    | Interest         | 0.00                               |
| 12. TOTAL AMOUNT DUE AND PAYABLE                                                                    |                                               |                                                    |                  | \$ 0.00                            |

I hereby certify that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

SIGNATURE  
AND TITLE

7/15/88

PLANT MANAGER

(818) 982-4800

MAKE CHECK OR MONEY ORDER PAYABLE TO STATE BOARD OF EQUALIZATION

PHONE NUMBER

Always Write Your Account Number on Your Check or Money Order

Mailed 7/15/88

BT-401-J (S11)  
REV. 15 (7-87)

OF  
CALIFORNIA

P. O. BOX 647  
SACRAMENTO CA 95803-0647

BOARD OF EQUALIZATION  
HAZARDOUS WASTE CONTROL ACCOUNT  
(FEE)

# HAZARDOUS WASTE TAX RETURN

DUE ON OR BEFORE **01/15/88** FOR **JUL - DEC 87**

Mail to:

**03761 19998 7287 HA HQ 36-015353**

RECEIVED

JAN 5 1988

Mercury Aerospace

STATE BOARD OF EQUALIZATION  
EXCISE TAX UNIT  
P. O. BOX 647  
SACRAMENTO CA 95803-0647

MERCURY AEROSPACE  
11800 SHERMAN WAY  
NORTH HOLLYWOOD CA 91609

READ INSTRUCTIONS  
BEFORE PREPARING

**CAD981413131**

Make Changes Above If  
Name or Address Incorrect

| Categories<br>(Definitions Enclosed)                                                                | A<br>Total Tonnage Disposed<br>of By Category | B<br>Taxable Tonnage<br>(round up to<br>whole ton) | C<br>Rate of Tax | D<br>Amount of Tax<br>(Col. B x C) |
|-----------------------------------------------------------------------------------------------------|-----------------------------------------------|----------------------------------------------------|------------------|------------------------------------|
| 0a. Recycled                                                                                        | 7.32<br><del>20.43</del>                      | 8                                                  | 0.00             |                                    |
| 0b. Disposed Out of State                                                                           |                                               |                                                    | 18.07            |                                    |
| 1. RCRA Exempt (Generally includes asbestos and petroleum based waste)                              |                                               |                                                    | 9.03             |                                    |
| 2. Mining Wastes                                                                                    |                                               |                                                    | 9.03             |                                    |
| 3a. Extremely Hazardous Surface Impounded                                                           |                                               |                                                    | 72.26            |                                    |
| 3b. Extremely Hazardous Not Surface Impounded                                                       |                                               |                                                    | 72.26            |                                    |
| 4a. Restricted Wastes Surface Impounded                                                             |                                               |                                                    | 72.26            |                                    |
| 4b. Restricted Wastes Not Surface Impounded                                                         |                                               |                                                    | 72.26            |                                    |
| 5. Other. (See category definitions)                                                                | A _____<br>B _____                            | A _____<br>B _____                                 | A 1.81<br>B 1.81 | A _____<br>B _____                 |
| 6a. Hazardous Waste Landfilled (Generally excludes asbestos and petroleum based waste - See line 1) |                                               |                                                    | 36.13            |                                    |
| 6b. Hazardous Waste Landfarmed                                                                      |                                               |                                                    | 36.13            |                                    |
| 6c. Hazardous Waste Injection Well                                                                  |                                               |                                                    | 36.13            |                                    |
| 6d. Hazardous Waste Surface Impounded                                                               |                                               |                                                    | 36.13            |                                    |
| 7. Shredder Waste                                                                                   |                                               |                                                    | 9.03             |                                    |
| 8. Double Lined Surface Impoundment (Restricted Category - See category definitions)                |                                               |                                                    | 3.61             |                                    |
| 9. Total Tax (add lines 1D through 8D)                                                              |                                               |                                                    |                  | \$ -0-                             |
| 10. Penalty of 10% (.10) if payment is made after the due date shown above.                         |                                               |                                                    | Penalty          |                                    |
| 11. INTEREST OF 14% PER ANNUM (0.011667% PER MONTH)<br>IS DUE IF MADE AFTER THE DUE DATE.           |                                               |                                                    | Interest         |                                    |
| 12. TOTAL AMOUNT DUE AND PAYABLE ..... (Add lines 9, 10 and 11)                                     |                                               |                                                    |                  | \$ - 0-                            |

I hereby certify that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

SIGNATURE  
AND TITLE

Assistant to President 1-11-88 (818) 982-4800  
MAKE CHECK OR MONEY ORDER PAYABLE TO STATE BOARD OF EQUALIZATION  
Always Write Your Account Number on Your Check or Money Order  
PHONE NUMBER

**COMMERCIAL GENERAL LIABILITY DECLARATIONS  
OCCURRENCE**
**Policy Number**

2029 00 055187

**Named Insured and Mailing Address**

MERCURY AEROSPACE FASTENERS, INC.  
11800 SHERMAN WAY  
N. HOLLYWOOD, CA 91609

Form of Business: CORPORATION

Adjustment of Premium: ANNUALLY

**Policy Period:** 7 24 88 to 7 24 89

12:01 A.M. standard time at above mailing address.

**IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO  
PROVIDE THE INSURANCE AS STATED IN THIS POLICY.**

**LIMITS OF INSURANCE**

|                                                                    |                    |                |
|--------------------------------------------------------------------|--------------------|----------------|
| GENERAL AGGREGATE LIMIT (Other Than Products—Completed Operations) | \$ 2,000,000       |                |
| PRODUCTS—COMPLETED OPERATIONS AGGREGATE LIMIT                      | \$ SEE END. CG2104 |                |
| PERSONAL & ADVERTISING INJURY LIMIT                                | \$ 1,000,000       |                |
| EACH OCCURRENCE LIMIT                                              | \$ 1,000,000       |                |
| FIRE DAMAGE LIMIT                                                  | \$ 50,000          | ANY ONE FIRE   |
| MEDICAL EXPENSE LIMIT                                              | \$ 5,000           | ANY ONE PERSON |

**SCHEDULE**

The declarations are completed on the accompanying "General Liability Schedule(s)."

|                                            | Advance Premium |
|--------------------------------------------|-----------------|
| Commercial General Liability Coverage Part | \$ 4,982        |
| Endorsement Premium                        | \$ ---          |
| Other charge(s): SEE FORM 20-1054          | \$              |
| Amount payable at inception:               | \$ 4,982        |

Issued by: ( ) EMPLOYERS INSURANCE OF WAUSAU A Mutual Company  
( x ) WAUSAU UNDERWRITERS INSURANCE COMPANY  
( ) ILLINOIS EMPLOYERS INSURANCE OF WAUSAU

Forms Applicable: See attached inventory

Bureau

(M) 82-50 587

GL0001

(11-85)

Countersigned by:

*J. D. Harrison*  
Authorized Representative

# GENERAL LIABILITY SCHEDULE

MERCURY AEROSPACE FASTENERS,  
INC.  
POLICY NBR: 2029-00-055187

SCHEDULE 1

## PREMIUM/EXPOSURE BASIS

|                         |              |
|-------------------------|--------------|
| A = AREA                | A = EACH     |
| C = TOTAL COST          | C = PER 100  |
| M = ADMISSIONS          | D = PER 1000 |
| P = PAYROLL             |              |
| S = GROSS SALES         |              |
| T = OTHER               |              |
| U = UNITS               |              |
| E = EXPOSURE TRANSITION |              |

## SCHEDULE

| CLASSIFICATIONS<br>-----               | PREMIUM<br>BASIS<br>----- | RATES<br>----- | PREMIUM<br>----- |
|----------------------------------------|---------------------------|----------------|------------------|
| <u>PREMISES/OPERATIONS</u>             |                           |                |                  |
| ---CALIFORNIA---                       |                           |                |                  |
| LOC 1 SUB LOC 1                        |                           |                |                  |
| 11800 SHERMAN WAY                      |                           |                |                  |
| N. HOLLYWOOD                           |                           |                |                  |
| PROGRAM: INDUSTRIAL & PROCESSING       |                           |                |                  |
|                                        | E                         | SD             |                  |
| 51500 (334) T-003 (0001)               | .75000                    | 3,500,000      | 1.898            |
| BOLT, NUT, RIVET, SCREW OR WASHER MFG. |                           |                | 4,982            |
| MINIMUM PREMIUM                        |                           |                |                  |
| \$ 240                                 |                           |                |                  |
| TOTAL ESTIMATED PREMIUM                |                           |                | 4,982            |

# Wausau Insurance Companies

## QUICK REFERENCE

### COMMERCIAL GENERAL LIABILITY COVERAGE PART OCCURRENCE

**READ YOUR POLICY CAREFULLY**

#### **DECLARATIONS PAGES**

Named Insured and Mailing Address  
Policy Period  
Description of Business and Location  
Coverages and Limits of Insurance

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# COMMERCIAL GENERAL LIABILITY COVERAGE FORM

Various provisions in this policy restrict coverage. Read the entire policy carefully to determine rights, duties and what is and is not covered.

Throughout this policy the words "you" and "your" refer to the Named Insured shown in the Declarations. The words "we", "us" and "our" refer to the Company providing this insurance.

The word "insured" means any person or organization qualifying as such under SECTION II — WHO IS AN INSURED.

Other words and phrases that appear in quotation marks have special meaning. Refer to SECTION V — DEFINITIONS.

## SECTION I — COVERAGES

### COVERAGE A. BODILY INJURY AND PROPERTY DAMAGE LIABILITY

#### 1. Insuring Agreement.

- a. We will pay those sums that the insured becomes legally obligated to pay as damages because of "bodily injury" or "property damage" to which this insurance applies. No other obligation or liability to pay sums or perform acts or services is covered unless explicitly provided for under SUPPLEMENTARY PAYMENTS — COVERAGES A AND B. This insurance applies only to "bodily injury" and "property damage" which occurs during the policy period. The "bodily injury" and "property damage" must be caused by an "occurrence." The "occurrence" must take place in the "coverage territory." We will have the right and duty to defend any "suit" seeking those damages. But:

- (1) The amount we will pay for damages is limited as described in SECTION III — LIMITS OF INSURANCE;
- (2) We may investigate and settle any claim or "suit" at our discretion; and
- (3) Our right and duty to defend end when we have used up the applicable limit of insurance in the payment of judgments or settlements under Coverages A or B or medical expenses under Coverage C.

- b. Damages because of "bodily injury" include damages claimed by any person or organization for care, loss of services or death resulting at any time from the "bodily injury."
- c. "Property damage" that is loss of use of tangible property that is not physically injured shall be deemed to occur at the time of the "occurrence" that caused it.

#### 2. Exclusions.

This insurance does not apply to:

- a. "Bodily injury" or "property damage" expected or intended from the standpoint of the insured. This exclusion does not apply to "bodily injury" resulting from the use of reasonable force to protect persons or property.
- b. "Bodily injury" or "property damage" for which the insured is obligated to pay damages by reason of the assumption of liability in a contract or agreement. This exclusion does not apply to liability for damages:

(1) Assumed in a contract or agreement that is an "insured contract;" or

(2) That the insured would have in the absence of the contract or agreement.

- c. "Bodily injury" or "property damage" for which any insured may be held liable by reason of:

(1) Causing or contributing to the intoxication of any person;

(2) The furnishing of alcoholic beverages to a person under the legal drinking age or under the influence of alcohol; or

(3) Any statute, ordinance or regulation relating to the sale, gift, distribution or use of alcoholic beverages.

This exclusion applies only if you are in the business of manufacturing, distributing, selling, serving or furnishing alcoholic beverages.

- d. Any obligation of the insured under a workers compensation, disability benefits or unemployment compensation law or any similar law.

- e. "Bodily injury" to:

(1) An employee of the insured arising out of and in the course of employment by the insured; or

(2) The spouse, child, parent, brother or sister of that employee as a consequence of (1) above.

This exclusion applies:

(1) Whether the insured may be liable as an employer or in any other capacity; and

(2) To any obligation to share damages with or repay someone else who must pay damages because of the injury.

This exclusion does not apply to liability assumed by the insured under an "insured contract."

- f. (1) "Bodily injury" or "property damage" arising out of the actual, alleged or threatened discharge, dispersal, release or escape of pollutants:

(a) At or from premises you own, rent or occupy;

(b) At or from any site or location used by or for you or others for the handling, storage, disposal, processing or treatment of waste;

(c) Which are at any time transported, handled, stored, treated, disposed of, or processed as waste by or for you or any person or organization for whom you may be legally responsible; or

(d) At or from any site or location on which you or any contractors or subcontractors working directly or indirectly on your behalf are performing operations:

(i) if the pollutants are brought on or to the site or location in connection with such operations; or

## COMMERCIAL GENERAL LIABILITY COVERAGE FORM (Continued)

- (ii) if the operations are to test for, monitor, clean up, remove, contain, treat, detoxify or neutralize the pollutants.
- (2) Any loss, cost, or expense arising out of any governmental direction or request that you test for, monitor, clean up, remove, contain, treat, detoxify or neutralize pollutants.

Pollutants means any solid, liquid, gaseous or thermal irritant or contaminant, including smoke, vapor, soot, fumes, acids, alkalis, chemicals and waste. Waste includes materials to be recycled, reconditioned or reclaimed.

- g. "Bodily injury" or "property damage" arising out of the ownership, maintenance, use or entrustment to others of any aircraft, "auto" or watercraft owned or operated by or rented or loaned to any insured. Use includes operation and "loading or unloading."

This exclusion does not apply to:

- (1) A watercraft while ashore on premises you own or rent;
- (2) A watercraft you do not own that is:
  - (a) Less than 26 feet long; and
  - (b) Not being used to carry persons or property for a charge;
- (3) Parking an "auto" on, or on the ways next to, premises you own or rent, provided the "auto" is not owned by or rented or loaned to you or the insured;
- (4) Liability assumed under any "insured contract" for the ownership, maintenance or use of aircraft or watercraft; or
- (5) "Bodily injury" or "property damage" arising out of the operation of any of the equipment listed in paragraph f.(2) or f.(3) of the definition of "mobile equipment" (Section V.8).

- h. "Bodily injury" or "property damage" arising out of:

- (1) The transportation of "mobile equipment" by an "auto" owned or operated by or rented or loaned to any insured; or
- (2) The use of "mobile equipment" in, or while in practice or preparation for, a prearranged racing, speed or demolition contest or in any stunting activity.

- i. "Bodily injury" or "property damage" due to war, whether or not declared, or any act or condition incident to war. War includes civil war, insurrection, rebellion or revolution. This exclusion applies only to liability assumed under a contract or agreement.

- j. "Property damage" to:

- (1) Property you own, rent, or occupy;
- (2) Premises you sell, give away or abandon, if the "property damage" arises out of any part of those premises;

- (3) Property loaned to you;
- (4) Personal property in your care, custody or control;
- (5) That particular part of real property on which you or any contractors or subcontractors working directly or indirectly on your behalf are performing operations, if the "property damage" arises out of those operations; or
- (6) That particular part of any property that must be restored, repaired or replaced because "your work" was incorrectly performed on it.

Paragraph (2) of this exclusion does not apply if the premises are "your work" and were never occupied, rented or held for rental by you.

Paragraphs (3), (4), (5) and (6) of this exclusion do not apply to liability assumed under a sidetrack agreement.

Paragraph (6) of this exclusion does not apply to "property damage" included in the "products-completed operations hazard."

- k. "Property damage" to "your product" arising out of it or any part of it.

- l. "Property damage" to "your work" arising out of it or any part of it and included in the "products-completed operations hazard."

This exclusion does not apply if the damaged work or the work out of which the damage arises was performed on your behalf by a subcontractor.

- m. "Property damage" to "impaired property" or property that has not been physically injured, arising out of:

- (1) A defect, deficiency, inadequacy or dangerous condition in "your product" or "your work;" or
- (2) A delay or failure by you or anyone acting on your behalf to perform a contract or agreement in accordance with its terms.

This exclusion does not apply to the loss of use of other property arising out of sudden and accidental physical injury to "your product" or "your work" after it has been put to its intended use.

- n. Damages claimed for any loss, cost or expense incurred by you or others for the loss of use, withdrawal, recall, inspection, repair, replacement, adjustment, removal or disposal of:

- (1) "Your product;"
- (2) "Your work;" or
- (3) "Impaired property;"

If such product, work, or property is withdrawn or recalled from the market or from use by any person or organization because of a known or suspected defect, deficiency, inadequacy or dangerous condition in it.

Exclusions c. through n. do not apply to damage by fire to premises rented to you. A separate limit of insurance applies to this coverage as described in SECTION III — LIMITS OF INSURANCE.

## COMMERCIAL GENERAL LIABILITY COVERAGE FORM (Continued)

### COVERAGE B. PERSONAL AND ADVERTISING INJURY LIABILITY

#### 1. Insuring Agreement.

- a. We will pay those sums that the insured becomes legally obligated to pay as damages because of "personal injury" or "advertising injury" to which this insurance applies. No other obligation or liability to pay sums or perform acts or services is covered unless explicitly provided for under SUPPLEMENTARY PAYMENTS — COVERAGES A AND B. We will have the right and duty to defend any "suit" seeking those damages. But:

- (1) The amount we will pay for damages is limited as described in SECTION III — LIMITS OF INSURANCE;
- (2) We may investigate and settle any claim or "suit" at our discretion; and
- (3) Our right and duty to defend end when we have used up the applicable limit of insurance in the payment of judgments or settlements under Coverages A or B or medical expenses under Coverage C.

- b. This insurance applies to "personal injury" only if caused by an offense:

- (1) Committed in the "coverage territory" during the policy period; and
- (2) Arising out of the conduct of your business, excluding advertising, publishing, broadcasting or telecasting done by or for you.

- c. This insurance applies to "advertising injury" only if caused by an offense committed:

- (1) In the "coverage territory" during the policy period; and
- (2) In the course of advertising your goods, products or services.

#### 2. Exclusions.

This insurance does not apply to:

- a. "Personal injury" or "advertising injury:"

- (1) Arising out of oral or written publication of material, if done by or at the direction of the insured with knowledge of its falsity;
- (2) Arising out of oral or written publication of material whose first publication took place before the beginning of the policy period;
- (3) Arising out of the willful violation of a penal statute or ordinance committed by or with the consent of the insured; or
- (4) For which the insured has assumed liability in a contract or agreement. This exclusion does not apply to liability for damages that the insured would have in the absence of the contract or agreement.

- b. "Advertising injury" arising out of:

- (1) Breach of contract, other than misappropriation of advertising ideas under an implied contract;
- (2) The failure of goods, products or services to conform with advertised quality or performance;
- (3) The wrong description of the price of goods, products or services; or
- (4) An offense committed by an insured whose business is advertising, broadcasting, publishing or telecasting.

### COVERAGE C. MEDICAL PAYMENTS

#### 1. Insuring Agreement.

- a. We will pay medical expenses as described below for "bodily injury" caused by an accident:

- (1) On premises you own or rent;
- (2) On ways next to premises you own or rent; or
- (3) Because of your operations;

provided that:

- (1) The accident takes place in the "coverage territory" and during the policy period;
- (2) The expenses are incurred and reported to us within one year of the date of the accident; and
- (3) The injured person submits to examination, at our expense, by physicians of our choice as often as we reasonably require.

- b. We will make these payments regardless of fault. These payments will not exceed the applicable limit of insurance. We will pay reasonable expenses for:

- (1) First aid at the time of an accident;
- (2) Necessary medical, surgical, x-ray and dental services, including prosthetic devices; and
- (3) Necessary ambulance, hospital, professional nursing and funeral services.

#### 2. Exclusions.

We will not pay expenses for "bodily injury:"

- a. To any insured.
- b. To a person hired to do work for or on behalf of any insured or a tenant of any insured.
- c. To a person injured on that part of premises you own or rent that the person normally occupies.
- d. To a person, whether or not an employee of any insured, if benefits for the "bodily injury" are payable or must be provided under a workers compensation or disability benefits law or a similar law.
- e. To a person injured while taking part in athletics.
- f. Included within the "products-completed operations hazard."
- g. Excluded under Coverage A.
- h. Due to war, whether or not declared, or any act or condition incident to war. War includes civil war, insurrection, rebellion or revolution.

## COMMERCIAL GENERAL LIABILITY COVERAGE FORM (Continued)

### SUPPLEMENTARY PAYMENTS — COVERAGES A AND B

We will pay, with respect to any claim or "suit" we defend:

1. All expenses we incur.
2. Up to \$250 for cost of bail bonds required because of accidents or traffic law violations arising out of the use of any vehicle to which the Bodily Injury Liability Coverage applies. We do not have to furnish these bonds.
3. The cost of bonds to release attachments, but only for bond amounts within the applicable limit of insurance. We do not have to furnish these bonds.
4. All reasonable expenses incurred by the insured at our request to assist us in the investigation or defense of the claim or "suit," including actual loss of earnings up to \$100 a day because of time off from work.
5. All costs taxed against the insured in the "suit."
6. Pre-judgment interest awarded against the insured on that part of the judgment we pay. If we make an offer to pay the applicable limit of insurance, we will not pay any pre-judgment interest based on that period of time after the offer.
7. All interest on the full amount of any judgment that accrues after entry of the judgment and before we have paid, offered to pay, or deposited in court the part of the judgment that is within the applicable limit of insurance.

These payments will not reduce the limits of insurance.

### SECTION II — WHO IS AN INSURED

1. If you are designated in the Declarations as:
  - a. An individual, you and your spouse are insureds, but only with respect to the conduct of a business of which you are the sole owner.
  - b. A partnership or joint venture, you are an insured. Your members, your partners, and their spouses are also insureds, but only with respect to the conduct of your business.
  - c. An organization other than a partnership or joint venture, you are an insured. Your executive officers and directors are insureds, but only with respect to their duties as your officers or directors. Your stockholders are also insureds, but only with respect to their liability as stockholders.
2. Each of the following is also an insured:
  - a. Your employees, other than your executive officers, but only for acts within the scope of their employment by you. However, none of these employees is an insured for:
    - (1) "Bodily injury" or "personal injury" to you or to a co-employee while in the course of his or her employment; or
    - (2) "Bodily injury" or "personal injury" arising out of his or her providing or failing to provide professional health care services; or
    - (3) "Property damage" to property owned or occupied by or rented or loaned to that employee, any of your other employees, or any of your partners or members (if you are a partnership or joint venture).

- b. Any person (other than your employee), or any organization while acting as your real estate manager.
  - c. Any person or organization having proper temporary custody of your property if you die, but only:
    - (1) With respect to liability arising out of the maintenance or use of that property; and
    - (2) Until your legal representative has been appointed.
  - d. Your legal representative if you die, but only with respect to duties as such. That representative will have all your rights and duties under this Coverage Part.
3. With respect to "mobile equipment" registered in your name under any motor vehicle registration law, any person is an insured while driving such equipment along a public highway with your permission. Any other person or organization responsible for the conduct of such person is also an insured, but only with respect to liability arising out of the operation of the equipment, and only if no other insurance of any kind is available to that person or organization for this liability. However, no person or organization is an insured with respect to:
    - a. "Bodily injury" to a co-employee of the person driving the equipment; or
    - b. "Property damage" to property owned by, rented to, in the charge of or occupied by you or the employer of any person who is an insured under this provision.
  4. Any organization you newly acquire or form, other than a partnership or joint venture, and over which you maintain ownership or majority interest, will be deemed to be a Named Insured if there is no other similar insurance available to that organization. However:
    - a. Coverage under this provision is afforded only until the 90th day after you acquire or form the organization or, the end of the policy period, whichever is earlier;
    - b. Coverage A does not apply to "bodily injury" or "property damage" that occurred before you acquired or formed the organization; and
    - c. Coverage B does not apply to "personal injury" or "advertising injury" arising out of an offense committed before you acquired or formed the organization.

No person or organization is an insured with respect to the conduct of any current or past partnership or joint venture that is not shown as a Named Insured in the Declarations.

### SECTION III — LIMITS OF INSURANCE

1. The Limits of Insurance shown in the Declarations and the rules below fix the most we will pay regardless of the number of:
  - a. Insureds;
  - b. Claims made or "suits" brought; or
  - c. Persons or organizations making claims or bringing "suits."
2. The General Aggregate Limit is the most we will pay for the sum of:
  - a. Medical expenses under Coverage C; and

## COMMERCIAL GENERAL LIABILITY COVERAGE FORM (Continued)

- b. Damages under Coverage A and Coverage B, except damages because of injury and damage included in the "products-completed operations hazard."
- 3. The Products-Completed Operations Aggregate Limit is the most we will pay under Coverage A for damages because of injury and damage included in the "products-completed operations hazard."
- 4. Subject to 2. above, the Personal and Advertising Injury Limit is the most we will pay under Coverage B for the sum of all damages because of all "personal injury" and all "advertising injury" sustained by any one person or organization.
- 5. Subject to 2. or 3. above, whichever applies, the Each Occurrence Limit is the most we will pay for the sum of:
  - a. Damages under Coverage A; and
  - b. Medical expenses under Coverage Cbecause of all "bodily injury" and "property damage" arising out of any one "occurrence."
- 6. Subject to 5. above, the Fire Damage Limit is the most we will pay under Coverage A for damages because of "property damage" to premises rented to you arising out of any one fire.
- 7. Subject to 5. above, the Medical Expense Limit is the most we will pay under Coverage C for all medical expenses because of "bodily injury" sustained by any one person.

The limits of this Coverage Part apply separately to each consecutive annual period and to any remaining period of less than 12 months, starting with the beginning of the policy period shown in the Declarations, unless the policy period is extended after issuance for an additional period of less than 12 months. In that case, the additional period will be deemed part of the last preceding period for purposes of determining the Limits of Insurance.

### SECTION IV — COMMERCIAL GENERAL LIABILITY CONDITIONS

#### 1. Bankruptcy.

Bankruptcy or insolvency of the insured or of the insured's estate will not relieve us of our obligations under this Coverage Part.

#### 2. Duties In The Event Of Occurrence, Claim Or Suit.

- a. You must see to it that we are notified promptly of an "occurrence" which may result in a claim. Notice should include:
  - (1) How, when and where the "occurrence" took place; and
  - (2) The names and addresses of any injured persons and witnesses.
- b. If a claim is made or "suit" is brought against any insured, you must see to it that we receive prompt written notice of the claim or "suit."
- c. You and any other involved insured must:
  - (1) Immediately send us copies of any demands, notices, summonses or legal papers received in connection with the claim or "suit;"

- (2) Authorize us to obtain records and other information;
  - (3) Cooperate with us in the investigation, settlement or defense of the claim or "suit;" and
  - (4) Assist us, upon our request, in the enforcement of any right against any person or organization which may be liable to the insured because of injury or damage to which this insurance may also apply.
- d. No insureds will, except at their own cost, voluntarily make a payment, assume any obligation, or incur any expense, other than for first aid, without our consent.

#### 3. Legal Action Against Us.

No person or organization has a right under this Coverage Part:

- a. To join us as a party or otherwise bring us into a "suit" asking for damages from an insured; or
- b. To sue us on this Coverage Part unless all of its terms have been fully complied with.

A person or organization may sue us to recover on an agreed settlement or on a final judgment against an insured obtained after an actual trial; but we will not be liable for damages that are not payable under the terms of this Coverage Part or that are in excess of the applicable limit of insurance. An agreed settlement means a settlement and release of liability signed by us, the insured and the claimant or the claimant's legal representative.

#### 4. Other Insurance.

If other valid and collectible insurance is available to the insured for a loss we cover under Coverages A or B of this Coverage Part, our obligations are limited as follows:

##### a. Primary Insurance

This insurance is primary except when b. below applies. If this insurance is primary, our obligations are not affected unless any of the other insurance is also primary. Then, we will share with all that other insurance by the method described in c. below.

##### b. Excess Insurance

This insurance is excess over any of the other insurance, whether primary, excess, contingent or on any other basis:

- (1) That is Fire, Extended Coverage, Builder's Risk, Installation Risk or similar coverage for "your work;"
- (2) That is Fire insurance for premises rented to you; or
- (3) If the loss arises out of the maintenance or use of aircraft, "autos" or watercraft to the extent not subject to Exclusion g. of Coverage A (Section I).

When this insurance is excess, we will have no duty under Coverage A or B to defend any claim or "suit" that any other insurer has a duty to defend. If no other insurer defends, we will undertake to do so, but we will be entitled to the insured's rights against all those other insurers.

## COMMERCIAL GENERAL LIABILITY COVERAGE FORM (Continued)

When this insurance is excess over other insurance, we will pay only our share of the amount of the loss, if any, that exceeds the sum of:

- (1) The total amount that all such other insurance would pay for the loss in the absence of this insurance; and
- (2) The total of all deductible and self-insured amounts under all that other insurance.

We will share the remaining loss, if any, with any other insurance that is not described in this Excess Insurance provision and was not bought specifically to apply in excess of the Limits of Insurance shown in the Declarations of this Coverage Part.

### c. Method of Sharing

If all of the other insurance permits contribution by equal shares, we will follow this method also. Under this approach each insurer contributes equal amounts until it has paid its applicable limit of insurance or none of the loss remains, whichever comes first.

If any of the other insurance does not permit contribution by equal shares, we will contribute by limits. Under this method, each insurer's share is based on the ratio of its applicable limit of insurance to the total applicable limits of insurance of all insurers.

### 5. Premium Audit.

- a. We will compute all premiums for this Coverage Part in accordance with our rules and rates.
- b. Premium shown in this Coverage Part as advance premium is a deposit premium only. At the close of each audit period we will compute the earned premium for that period. Audit premiums are due and payable on notice to the first Named Insured. If the sum of the advance and audit premiums paid for the policy term is greater than the earned premium, we will return the excess to the first Named Insured.
- c. The first Named Insured must keep records of the information we need for premium computation, and send us copies at such times as we may request.

### 6. Representations.

By accepting this policy, you agree:

- a. The statements in the Declarations are accurate and complete;
- b. Those statements are based upon representations you made to us; and
- c. We have issued this policy in reliance upon your representations.

### 7. Separation Of Insureds.

Except with respect to the Limits of Insurance, and any rights or duties specifically assigned in this Coverage Part to the first Named Insured, this insurance applies:

- a. As if each Named Insured were the only Named Insured; and
- b. Separately to each insured against whom claim is made or "suit" is brought.

### 8. Transfer Of Rights Of Recovery Against Others To Us.

If the insured has rights to recover all or part of any payment we have made under this Coverage Part, those rights are transferred to us. The insured must do nothing after loss to impair them. At our request, the insured will bring "suit" or transfer those rights to us and help us enforce them.

## SECTION V — DEFINITIONS

1. "Advertising injury" means injury arising out of one or more of the following offenses:

- a. Oral or written publication of material that slanders or libels a person or organization or disparages a person's or organization's goods, products or services;
- b. Oral or written publication of material that violates a person's right of privacy;
- c. Misappropriation of advertising ideas or style of doing business; or
- d. Infringement of copyright, title or slogan.

2. "Auto" means a land motor vehicle, trailer or semitrailer designed for travel on public roads, including any attached machinery or equipment. But "auto" does not include "mobile equipment."

3. "Bodily injury" means bodily injury, sickness or disease sustained by a person, including death resulting from any of these at any time.

4. "Coverage territory" means:

- a. The United States of America (including its territories and possessions), Puerto Rico and Canada;
- b. International waters or airspace, provided the injury or damage does not occur in the course of travel or transportation to or from any place not included in a. above; or
- c. All parts of the world if:

- (1) The injury or damage arises out of:

- (a) Goods or products made or sold by you in the territory described in a. above; or
- (b) The activities of a person whose home is in the territory described in a. above, but is away for a short time on your business; and

- (2) The insured's responsibility to pay damages is determined in a "suit" on the merits, in the territory described in a. above or in a settlement we agree to.

5. "Impaired property" means tangible property, other than "your product" or "your work," that cannot be used or is less useful because:

- a. It incorporates "your product" or "your work" that is known or thought to be defective, deficient, inadequate or dangerous; or
- b. You have failed to fulfill the terms of a contract or agreement;

if such property can be restored to use by:

## COMMERCIAL GENERAL LIABILITY COVERAGE FORM (Continued)

- a. The repair, replacement, adjustment or removal of "your product" or "your work;" or
  - b. Your fulfilling the terms of the contract or agreement.
6. "Insured contract" means:
- a. A lease of premises;
  - b. A sidetrack agreement;
  - c. An easement or license agreement in connection with vehicle or pedestrian private railroad crossings at grade;
  - d. Any other easement agreement, except in connection with construction or demolition operations on or within 50 feet of a railroad;
  - e. An indemnification of a municipality as required by ordinance, except in connection with work for a municipality;
  - f. An elevator maintenance agreement; or
  - g. That part of any other contract or agreement pertaining to your business under which you assume the tort liability of another to pay damages because of "bodily injury" or "property damage" to a third person or organization, if the contract or agreement is made prior to the "bodily injury" or "property damage." Tort liability means a liability that would be imposed by law in the absence of any contract or agreement.

An "insured contract" does not include that part of any contract or agreement:

- a. That indemnifies an architect, engineer or surveyor for injury or damage arising out of:
    - (1) Preparing, approving or failing to prepare or approve maps, drawings, opinions, reports, surveys, change orders, designs or specifications; or
    - (2) Giving directions or instructions, or failing to give them, if that is the primary cause of the injury or damage;
  - b. Under which the insured, if an architect, engineer or surveyor, assumes liability for injury or damage arising out of the insured's rendering or failing to render professional services, including those listed in a. above and supervisory, inspection or engineering services; or
  - c. That indemnifies any person or organization for damage by fire to premises rented or loaned to you.
7. "Loading or unloading" means the handling of property:
- a. After it is moved from the place where it is accepted for movement into or onto an aircraft, watercraft or "auto;"
  - b. While it is in or on an aircraft, watercraft or "auto;" or
  - c. While it is being moved from an aircraft, watercraft or "auto" to the place where it is finally delivered;
- but "loading or unloading" does not include the movement of property by means of a mechanical device, other than a hand truck, that is not attached to the aircraft, watercraft or "auto."
8. "Mobile equipment" means any of the following types of land vehicles, including any attached machinery or equipment:

- a. Bulldozers, farm machinery, forklifts and other vehicles designed for use principally off public roads;
- b. Vehicles maintained for use solely on or next to premises you own or rent;
- c. Vehicles that travel on crawler treads;
- d. Vehicles, whether self-propelled or not, maintained primarily to provide mobility to permanently mounted:
  - (1) Power cranes, shovels, loaders, diggers or drills; or
  - (2) Road construction or resurfacing equipment such as graders, scrapers or rollers;
- e. Vehicles not described in a., b., c. or d. above that are not self-propelled and are maintained primarily to provide mobility to permanently attached equipment of the following types:
  - (1) Air compressors, pumps and generators, including spraying, welding, building cleaning, geophysical exploration, lighting and well servicing equipment; or
  - (2) Cherry pickers and similar devices used to raise or lower workers;
- f. Vehicles not described in a., b., c. or d. above maintained primarily for purposes other than the transportation of persons or cargo.

However, self-propelled vehicles with the following types of permanently attached equipment are not "mobile equipment" but will be considered "autos:"

- (1) Equipment designed primarily for:
    - (a) Snow removal;
    - (b) Road maintenance, but not construction or resurfacing;
    - (c) Street cleaning;
  - (2) Cherry pickers and similar devices mounted on automobile or truck chassis and used to raise or lower workers; and
  - (3) Air compressors, pumps and generators, including spraying, welding, building cleaning, geophysical exploration, lighting and well servicing equipment.
9. "Occurrence" means an accident, including continuous or repeated exposure to substantially the same general harmful conditions.
10. "Personal injury" means injury, other than "bodily injury," arising out of one or more of the following offenses:
- a. False arrest, detention or imprisonment;
  - b. Malicious prosecution;
  - c. Wrongful entry into, or eviction of a person from, a room, dwelling or premises that the person occupies;
  - d. Oral or written publication of material that slanders or libels a person or organization or disparages a person's or organization's goods, products or services; or
  - e. Oral or written publication of material that violates a person's right of privacy.

**COMMERCIAL GENERAL LIABILITY COVERAGE FORM (Continued)**

11. a. "Products-completed operations hazard" includes all "bodily injury" and "property damage" occurring away from premises you own or rent and arising out of "your product" or "your work" except:
- (1) Products that are still in your physical possession; or
  - (2) Work that has not yet been completed or abandoned.
- b. "Your work" will be deemed completed at the earliest of the following times:
- (1) When all of the work called for in your contract has been completed.
  - (2) When all of the work to be done at the site has been completed if your contract calls for work at more than one site.
  - (3) When that part of the work done at a job site has been put to its intended use by any person or organization other than another contractor or subcontractor working on the same project.
- Work that may need service, maintenance, correction, repair or replacement, but which is otherwise complete, will be treated as completed.
- c. This hazard does not include "bodily injury" or "property damage" arising out of:
- (1) The transportation of property, unless the injury or damage arises out of a condition in or on a vehicle created by the "loading or unloading" of it;
  - (2) The existence of tools, uninstalled equipment or abandoned or unused materials;
  - (3) Products or operations for which the classification in this Coverage Part or in our manual of rules includes products or completed operations.
12. "Property damage" means:
- a. Physical injury to tangible property, including all resulting loss of use of that property; or
  - b. Loss of use of tangible property that is not physically injured.
13. "Suit" means a civil proceeding in which damages because of "bodily injury," "property damage," "personal injury" or "advertising injury" to which this insurance applies are alleged. "Suit" includes an arbitration proceeding alleging such damages to which you must submit or submit with our consent.
14. "Your product" means:
- a. Any goods or products, other than real property, manufactured, sold, handled, distributed or disposed of by:
    - (1) You;
    - (2) Others trading under your name; or
    - (3) A person or organization whose business or assets you have acquired; and
  - b. Containers (other than vehicles), materials, parts or equipment furnished in connection with such goods or products.
- "Your product" includes warranties or representations made at any time with respect to the fitness, quality, durability or performance of any of the items included in a. and b. above.
- "Your product" does not include vending machines or other property rented to or located for the use of others but not sold.
15. "Your work" means:
- a. Work or operations performed by you or on your behalf; and
  - b. Materials, parts or equipment furnished in connection with such work or operations.
- "Your work" includes warranties or representations made at any time with respect to the fitness, quality, durability or performance of any of the items included in a. or b. above.

# Wausau Insurance Companies

Policy Number                      Assn.                                      T    Producer                                      Alpha  
2029 00 055187  
Named Insured and Mailing Address  
MERCURY AEROSPACE FASTENERS, INC.

This endorsement is effective            7 24 88                                      and will terminate with the policy  
Policy Period:                                      to                                      12:01 A.M. standard time at above mailing address.

This endorsement is issued by the Company designated in the Declarations.  
All other provisions of the policy remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **EXCLUSION ENDORSEMENT — PRODUCTS — COMPLETED OPERATIONS HAZARD**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

This insurance does not apply to "bodily injury" or "property damage" included within the "products—completed operations hazard".

# Wausau Insurance Companies

**Policy Number**                      Assn.                      T    Producer                      Alpha  
2029 00 055187  
**Named Insured and Mailing Address**  
MERCURY AEROSPACE FASTENERS, INC.

This Endorsement is effective                      7 24 88                      and will terminate with the policy.  
**Policy Period:**                      to                      12:01 A.M. standard time at above mailing address.

This endorsement is issued by the Company designated in the Declarations.  
All other provisions of the policy remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**  
**PREMIUM AUDIT — TRANSITION EXCEPTION ENDORSEMENT**

## SCHEDULE

### Classification Code

Any classification codes 90000 through 99999

Your policy contains classifications which have undergone exposure base changes. The primary exposure base changes are:

| <b>Operation/Exposure</b>                   | <b>Former<br/>Exposure Base</b> | <b>New<br/>Exposure Base</b> |
|---------------------------------------------|---------------------------------|------------------------------|
| Mercantile — Premises/Operations            | Area                            | Gross Sales                  |
| Manufacturing — Premises/Operations         | Payroll                         | Gross Sales                  |
| Contracting — Products/Completed Operations | Gross Sales                     | Payroll                      |

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Page 1 of 2 pages



## PREMIUM AUDIT — TRANSITION EXCEPTION ENDORSEMENT (Continued)

The rates shown in the policy for the classifications identified above will be your final rates and will not be subject to adjustment at audit due to exposure base changes.

The rates developed for classifications *other than those identified above* were based on your business or industry's AVERAGES to establish the relationship between your former exposure base and your new exposure base.

Your actual exposures may be significantly different than the averages used to develop rates. In order to prevent premium fluctuations resulting solely from the change in exposure base, your estimated annual premium has been capped at a maximum (to prevent a significant increase) or a minimum (to prevent a significant decrease).

Your schedule may contain a TRANSITION debit or credit as a result of the capping of your premium; or it may contain an exposure adjustment factor as a result of the capping of your premium.

Your premium for classifications other than those identified above will be computed at the time of audit based upon your actual exposures (both former exposure and new exposure) for the policy period and premium fluctuations due solely to the change in exposure will be capped at a maximum or minimum.



Wausau Insurance Companies

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## AMENDMENT OF POLLUTION EXCLUSION ENDORSEMENT

This endorsement modifies insurance provided under the following:

### COMMERCIAL GENERAL LIABILITY COVERAGE PART

The following is added to exclusion f. of COVERAGE A (Section I):

Subparagraphs (a) and (d)(i) of paragraph (1) of this exclusion do not apply to "bodily injury" or "property damage" caused by heat, smoke or fumes from a hostile fire. As used in this exclusion, a hostile fire means one which becomes uncontrollable or breaks out from where it was intended to be.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT (BROAD FORM)

This endorsement modifies insurance provided under the following coverage parts or coverage forms if the particular coverage part or coverage form has been made a part of the policy:

BUSINESSOWNERS POLICY  
COMMERCIAL AUTO COVERAGE PART  
COMMERCIAL GENERAL LIABILITY COVERAGE PART  
FARM COVERAGE PART  
LIQUOR LIABILITY COVERAGE PART  
POLLUTION LIABILITY COVERAGE PART  
OWNERS AND CONTRACTORS PROTECTIVE LIABILITY COVERAGE PART  
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART  
RAILROAD PROTECTIVE LIABILITY COVERAGE PART  
SPECIAL PROTECTIVE AND HIGHWAY LIABILITY POLICY — NEW YORK DEPARTMENT OF TRANSPORTATION

1. The insurance does not apply:

A. Under any Liability Coverage, to "bodily injury" or "property damage:"

- (1) With respect to which an "insured" under the policy is also an insured under a nuclear energy liability policy issued by Nuclear Energy Liability Insurance Association, Mutual Atomic Energy Liability Underwriters, Nuclear Insurance Association of Canada or any of their successors, or would be an insured under any such policy but for its termination upon exhaustion of its limit of liability; or
- (2) Resulting from the "hazardous properties" of "nuclear material" and with respect to which (a) any person or organization is required to maintain financial protection pursuant to the Atomic Energy Act of 1954, or any law amendatory thereof, or (b) the "insured" is, or had this policy not been issued would be, entitled to indemnity from the United States of America, or any agency thereof, under any agreement entered into by the United States of America, or any agency thereof, with any person or organization.

B. Under any Medical Payments coverage, to expenses incurred with respect to "bodily injury" resulting from the "hazardous properties" of "nuclear material" and arising out of the operation of a "nuclear facility" by any person or organization.

C. Under any Liability Coverage, to "bodily injury" or "property damage" resulting from the "hazardous properties" of "nuclear material," if:

- (1) The "nuclear material" (a) is at any "nuclear facility" owned by, or operated by or on behalf of, an "insured" or (b) has been discharged or dispersed therefrom;

- (2) The "nuclear material" is contained in "spent fuel" or "waste" at any time possessed, handled, used, processed, stored, transported or disposed of by or on behalf of an "insured;" or

- (3) The "bodily injury" or "property damage" arises out of the furnishing by an "insured" of services, materials, parts or equipment in connection with the planning, construction, maintenance, operation or use of any "nuclear facility," but if such facility is located within the United States of America, its territories or possessions or Canada, this exclusion (3) applies only to "property damage" to such "nuclear facility" and any property thereat.

2. As used in this endorsement:

"Hazardous properties" include radioactive, toxic or explosive properties;

"Nuclear material" means "source material," "Special nuclear material" or "by-product material;"

"Source material," "special nuclear material," and "by-product material" have the meanings given them in the Atomic Energy Act of 1954 or in any law amendatory thereof;

"Spent fuel" means any fuel element or fuel component, solid or liquid, which has been used or exposed to radiation in a "nuclear reactor;"

"Waste" means any waste material (a) containing "by-product material" other than the tailings or wastes produced by the extraction or concentration of uranium or thorium from any ore processed primarily for its "source material" content, and (b) resulting from the operation by any person or organization of any "nuclear facility" included under the first two paragraphs of the definition of "nuclear facility."

**NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT (BROAD FORM) (Continued)**

"Nuclear facility" means:

- (a) Any "nuclear reactor;"
- (b) Any equipment or device designed or used for (1) separating the isotopes of uranium or plutonium, (2) processing or utilizing "spent fuel," or (3) handling, processing or packaging "waste;"
- (c) Any equipment or device used for the processing, fabricating or alloying of "special nuclear material" if at any time the total amount of such material in the custody of the "insured" at the premises where such equipment or device is located consists of or contains more than 25 grams of plutonium or uranium 233 or any combination thereof, or more than 250 grams of uranium 235;

- (d) Any structure, basin, excavation, premises or place prepared or used for the storage or disposal of "waste;" and includes the site on which any of the foregoing is located, all operations conducted on such site and all premises used for such operations;

"Nuclear reactor" means any apparatus designed or used to sustain nuclear fission in a self-supporting chain reaction or to contain a critical mass of fissionable material;

"Property damage" includes all forms of radioactive contamination of property.

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All other provisions of the policy remain unchanged.  
This endorsement is issued by the Company designated in the Declarations.



## Wausau Insurance Companies

### POLICYHOLDER NOTICE OF CHANGE IN COVERAGE COMMERCIAL PROPERTY — POLLUTION CHANGES

**NOTICE:** Your Commercial Property Policy has changed. The following is a summary of the significant features where coverage has been broadened or restricted. **Please Read Your Policy Carefully.**

#### RESTRICTIVE FEATURES

1. Debris Removal coverage is limited to 25% of the amount of "net loss." "Net loss" is the sum of the deductible and the amount of loss we pay. However, if the actual debris removal costs should exceed this percentage, we'll pay up to an additional \$5,000 for each location, in any one occurrence.
2. Covered Debris Removal expenses must be reported to us in writing within 180 days of the date of the direct physical loss or damage or the end of the policy period, if earlier.
3. Debris Removal coverage explicitly does **not** cover the cost to extract pollutants from land or water, or to remove, restore or replace polluted land or water.
4. Coverage for pollution in any form or endorsement attached to this policy is confined to only the pollution that is caused by a specifically listed peril. Also, ensuing losses by pollution are covered only if they are one of those listed perils.
5. Water and land are specifically described as property not covered.
6. With regard to coverage for consequential damage, coverage does not apply to any period of time required by the enforcement of environmental clean-up laws.

#### BROADENED FEATURES

1. Your policy contains a new Additional Coverage for clean up and removal of pollutants from land or water at your premises. The discharge must have been caused by a covered peril which occurs during the policy period, and your clean-up expense must be reported to us in writing within 180 days of the date of the direct physical loss or damage or the end of the policy period, if earlier.
2. \$10,000 is provided for this coverage **automatically** for each location. However, this \$10,000 limit applies to **all** clean up expenses arising out of each policy year. In other words, once we've paid this \$10,000, we won't pay for any more pollutant clean up expenses arising from direct losses occurring during the rest of the policy year.

SPECIAL MULTI-FLEX POLICY consists of this Common Policy Declarations Page, the Policy Jacket, Common Policy Conditions, Coverage Parts and any other forms and endorsements issued to be a part of this policy.

**THE HARTFORD**



**COMMON POLICY DECLARATIONS**

**Policy No.** 72 UUN JA4900

MERCURY AEROSPACE FASTENERS, INC.  
11800 SHERMAN WAY  
NORTH HOLLYWOOD CA 91609-9759

**Previous Policy No.**

NEW

**Named Insured and Mailing Address**

**Policy Period**

11 a.m., standard time at your mailing address shown above.

**From** 7-24-89 **To** 7-24-90

MSI #389

**Agent's or Broker's Name**

**Code**

ROSH & MCLENNAN, INC.

254328

**4. Audit Period:** Not subject to audit unless otherwise stated —  
☒ Annual ☐ Semi-annual ☐ Quarterly ☐ Monthly

**5. Named Insured is:**

☐ Individual ☐ Partnership ☐ Joint Venture  
☒ Corporation ☐ Other:

**Description of your Business** FASTENERS MFG.

**Insurance Provided**

Return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide insurance as stated in this policy.

Coverage Parts that are a part of this policy are listed below or on the Extension Schedule attached. The premiums shown may be subject to adjustment.

**Summary of Coverage Parts, Insurance Company and Premium:**

| Coverage Part                | Co. Code | Insurance Company and Address                                  | Advance Premium |
|------------------------------|----------|----------------------------------------------------------------|-----------------|
| SPECIAL PROPERTY             | 3        | HARTFORD CASUALTY INSURANCE CO.<br>INDIANAPOLIS, IN 46268-0930 | \$ 22,475.      |
| COMMERCIAL INLAND MARINE     | 5        | HARTFORD ACCIDENT & INDEMNITY CO.<br>HARTFORD, CT 06115        | 541.            |
| COMMERCIAL AUTO              | 3        | HARTFORD CASUALTY INSURANCE CO.<br>INDIANAPOLIS, IN 46268-0930 | 8,192.          |
| COMMERCIAL GENERAL LIABILITY | 5        | HARTFORD ACCIDENT & INDEMNITY CO.<br>HARTFORD, CT 06115        | 5,498.          |
| EMPLOYEE BENEFITS            | 5        | HARTFORD ACCIDENT & INDEMNITY CO.<br>HARTFORD, CT 06115        | INCLUDED        |
| <b>TOTAL SURCHARGE</b>       |          |                                                                | 285.14          |

Annual Premium excluding Automobile is \$ 28,799.14 and is payable \$ PER HM9901 at each anniversary.  
Annual Premium for Automobile is \$ 8,192. and is payable \$ PER HM9901 at each anniversary; but will be recomputed at each anniversary using rates and rules then in effect.  
Annual Premium payable at inception is \$ PER HM9901. An ☒ below means the total premium will be recomputed at each anniversary.  
☐ (See Form IL 00 03)

**Numbers of Coverage Parts, Forms and Endorsements that are a part of this policy and that are not listed in the Coverage Parts:**

000011185 IH00170586 IL02700388 HM99011185 HM30010988 HM00200186 HA00010187  
000101185 HC00200286

Designed by

COMMERCIAL POLICY NO. 72 UUN JA4900  
GENERAL LIABILITY SCHEDULE

ENTRIES HEREIN, EXCEPT AS SPECIFICALLY PROVIDED ELSEWHERE IN THIS POLICY,  
DO NOT MODIFY ANY OF THE OTHER PROVISIONS OF THIS POLICY.

RATING CLASSIFICATIONS

DESCRIPTION OF HAZARDS: PREMISES/OPERATIONS COVERAGE

REFER TO: "COMMERCIAL GENERAL LIABILITY  
COVERAGE PART" (FORM HC0010)

PRMS/BLDG. NO: 001/001 TERR: 003  
11800 SHERMAN WAY, NORTH HOLLYWOOD, CA 91609

CLASSIFICATION CODE NUMBER  
AND DESCRIPTION: 51500  
BOLT, NUT, RIVET, SCREW OR WASHER MFG.

PREMIUM AND RATING BASIS: GROSS SALES PER 1,000

EXPOSURE: 5,600,000

RATE: 0.9660

ADVANCE PREMIUM: 5,410.00

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DESCRIPTION OF HAZARDS: EMPLOYEE BENEFITS COVERAGE

REFER TO: "EMPLOYEE BENEFITS LIABILITY  
COVERAGE PART" (FORM HC0020)

CLASSIFICATION CODE NUMBER  
AND DESCRIPTION: 30195  
EMPLOYEE BENEFITS

PREMIUM AND RATING BASIS: EMPLOYEE PER 1

EXPOSURE: 48

RATE: 0.0880

ADVANCE PREMIUM: 88.00 MF

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TOTAL ADVANCE PREMIUM: 5,498.00

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THIS POLICY IS SUBJECT TO THE TERMS AND CONDITIONS OF THE POLICY CONTRACT AND THE POLICY SCHEDULE.

THE POLICY IS SUBJECT TO THE TERMS AND CONDITIONS OF THE POLICY CONTRACT AND THE POLICY SCHEDULE.

ALL INFORMATION IS SUBJECT TO THE TERMS AND CONDITIONS OF THE POLICY CONTRACT AND THE POLICY SCHEDULE.

DESCRIPTION OF HAZARD: PREMIUM/RENTAL LOSS COVERAGE

REFER TO: COMMERCIAL GENERAL LIABILITY COVERAGE PART (FORM HO0010)

CLASSIFICATION CODE NUMBER: PERM/BLDG. NO:

AND DESCRIPTION: BOLT, NUT, RIVET, SCREW OR WASHER, ETC.  
B1P00

PREMIUM AND RATING BASIS: GROSS SALES PER 1000

EXPOSURE: \$400,000

RATE: 0.9650

ADVANCE PREMIUM: \$410.00

DESCRIPTION OF HAZARD: EMPLOYEE BENEFIT COVERAGE

REFER TO: "EMPLOYEE BENEFIT LIABILITY COVERAGE PART" (FORM HO0020)

CLASSIFICATION CODE NUMBER: 3015  
AND DESCRIPTION: EMPLOYEE BENEFITS

PREMIUM AND RATING BASIS: EMPLOYEE

EXPOSURE: 40

RATE: 0.9650

ADVANCE PREMIUM: \$410.00

TOTAL ADVANCE PREMIUM: \$410.00

# COMMERCIAL GENERAL LIABILITY COVERAGE FORM

Various provisions in this policy restrict coverage. Read the entire policy carefully to determine rights, duties and what is and is not covered.

Throughout this policy the words "you" and "your" refer to the Named Insured shown in the Declarations. The words "we," "us" and "our" refer to the Company providing this insurance.

The word "insured" means any person or organization qualifying as such under SECTION II — WHO IS AN INSURED.

Other words and phrases that appear in quotation marks have special meaning. Refer to SECTION V — DEFINITIONS.

## SECTION I — COVERAGES

### COVERAGE A. BODILY INJURY AND PROPERTY DAMAGE LIABILITY

#### 1. Insuring Agreement.

- a. We will pay those sums that the insured becomes legally obligated to pay as damages because of "bodily injury" or "property damage" to which this insurance applies. No other obligation or liability to pay sums or perform acts or services is covered unless explicitly provided for under SUPPLEMENTARY PAYMENTS — COVERAGES A AND B. This insurance applies only to "bodily injury" and "property damage" which occurs during the policy period. The "bodily injury" or "property damage" must be caused by an "occurrence." The "occurrence" must take place in the "coverage territory." We will have the right and duty to defend any "suit" seeking those damages. But:

- (1) The amount we will pay for damages is limited as described in SECTION III — LIMITS OF INSURANCE;

- (2) We may investigate and settle any claim or "suit" at our discretion; and

- (3) Our right and duty to defend end when we have used up the applicable limit of insurance in the payment of judgments or settlements under Coverages A or B or medical expenses under Coverage C.

- b. Damages because of "bodily injury" include damages claimed by any person or organization for care, loss of services or death resulting at any time from the "bodily injury."

- c. "Property damage" that is loss of use of tangible property that is not physically injured shall be deemed to occur at the time of the "occurrence" that caused it.

#### 2. Exclusions.

This insurance does not apply to:

- a. "Bodily injury" or "property damage" expected or intended from the standpoint of the insured. This exclusion does not apply to "bodily injury" resulting from the use of reasonable force to protect persons or property.

- b. "Bodily injury" or "property damage" for which the insured is obligated to pay damages by reason of the assumption of liability in a contract or agreement. This exclusion does not apply to liability for damages:

- (1) Assumed in a contract or agreement that is an "insured contract;" or

- (2) That the insured would have in the absence of the contract or agreement.

- c. "Bodily injury" or "property damage" for which any insured may be held liable by reason of:

- (1) Causing or contributing to the intoxication of any person;

- (2) The furnishing of alcoholic beverages to a person under the legal drinking age or under the influence of alcohol; or

- (3) Any statute, ordinance or regulation relating to the sale, gift, distribution or use of alcoholic beverages.

This exclusion applies only if you are in the business of manufacturing, distributing, selling, serving or furnishing alcoholic beverages.

- d. Any obligation of the insured under a workers compensation, disability benefits or unemployment compensation law or any similar law.

- e. "Bodily injury" to:

- (1) An employee of the insured arising out of and in the course of employment by the insured; or

- (2) The spouse, child, parent, brother or sister of that employee as a consequence of (1) above.

This exclusion applies:

- (1) Whether the insured may be liable as an employer or in any other capacity; and

- (2) To any obligation to share damages with or repay someone else who must pay damages because of the injury.

This exclusion does not apply to liability assumed by the insured under an "insured contract."

COMMERCIAL GENERAL LIABILITY  
COVERAGE FORM

f. (1) "Bodily injury" or "property damage" arising out of the actual, alleged or threatened discharge, dispersal, release or escape of pollutants:

(a) At or from premises you own, rent or occupy;

(b) At or from any site or location used by or for you or others for the handling, storage, disposal, processing or treatment of waste;

(c) Which are at any time transported, handled, stored, treated, disposed of, or processed as waste by or for you or any person or organization for whom you may be legally responsible; or

(d) At or from any site or location on which you or any contractors or subcontractors working directly or indirectly on your behalf are performing operations:

(i) if the pollutants are brought on or to the site or location in connection with such operations; or

(ii) if the operations are to test for, monitor, clean up, remove, contain, treat, detoxify or neutralize the pollutants.

(2) Any loss, cost, or expense arising out of any governmental direction or request that you test for, monitor, clean up, remove, contain, treat, detoxify or neutralize pollutants.

Pollutants means any solid, liquid, gaseous or thermal irritant or contaminant, including smoke, vapor, soot, fumes, acids, alkalis, chemicals and waste. Waste includes materials to be recycled, reconditioned or reclaimed.

g. "Bodily injury" or "property damage" arising out of the ownership, maintenance, use or entrustment to others of any aircraft, "auto" or watercraft owned or operated by or rented or loaned to any insured. Use includes operation and "loading or unloading."

This exclusion does not apply to:

(1) A watercraft while ashore on premises you own or rent;

(2) A watercraft you do not own that is:

(a) Less than 26 feet long; and

(b) Not being used to carry persons or property for a charge;

(3) Parking an "auto" on, or on the ways next to, premises you own or rent, provided the "auto" is not owned by or rented or loaned to you or the insured;

(4) Liability assumed under any "insured contract" for the ownership, maintenance or use of aircraft or watercraft; or

(5) "Bodily injury" or "property damage" arising out of the operation of any of the equipment listed in paragraph f.(2) or f.(3) of the definition of "mobile equipment" (Section V.8).

h. "Bodily injury" or "property damage" arising out of:

(1) The transportation of "mobile equipment" by an "auto" owned or operated by or rented or loaned to any insured; or

(2) The use of "mobile equipment" in, or while in practice or preparation for, a prearranged racing, speed or demolition contest or in any stunting activity.

i. "Bodily injury" or "property damage" due to war, whether or not declared, or any act or condition incident to war. War includes civil war, insurrection, rebellion or revolution. This exclusion applies only to liability assumed under a contract or agreement.

j. "Property damage" to:

(1) Property you own, rent, or occupy;

(2) Premises you sell, give away or abandon, if the "property damage" arises out of any part of those premises;

(3) Property loaned to you;

(4) Personal property in your care, custody or control;

(5) That particular part of real property on which you or any contractors or subcontractors working directly or indirectly on your behalf are performing operations, if the "property damage" arises out of those operations; or

(6) That particular part of any property that must be restored, repaired or replaced because "your work" was incorrectly performed on it.

Paragraph (2) of this exclusion does not apply if the premises are "your work" and were never occupied, rented or held for rental by you.

Paragraphs (3), (4), (5) and (6) of this exclusion do not apply to liability assumed under a sidetrack agreement.

Paragraph (6) of this exclusion does not apply to "property damage" included in the "products-completed operations hazard."

k. "Property damage" to "your product" arising out of it or any part of it.

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- l. "Property damage" to "your work" arising out of it or any part of it and included in the "products-completed operations hazard."

This exclusion does not apply if the damaged work or the work out of which the damage arises was performed on your behalf by a subcontractor.

- m. "Property damage" to "impaired property" or property that has not been physically injured, arising out of:

- (1) A defect, deficiency, inadequacy or dangerous condition in "your product" or "your work;" or
- (2) A delay or failure by you or anyone acting on your behalf to perform a contract or agreement in accordance with its terms.

This exclusion does not apply to the loss of use of other property arising out of sudden and accidental physical injury to "your product" or "your work" after it has been put to its intended use.

- n. Damages claimed for any loss, cost or expense incurred by you or others for the loss of use, withdrawal, recall, inspection, repair, replacement, adjustment, removal or disposal of:

- (1) "Your product;"
- (2) "Your work;" or
- (3) "Impaired property;"

if such product, work, or property is withdrawn or recalled from the market or from use by any person or organization because of a known or suspected defect, deficiency, inadequacy or dangerous condition in it.

Exclusions c., through n. do not apply to damage by fire to premises rented to you. A separate limit of insurance applies to this coverage as described in SECTION III — LIMITS OF INSURANCE.

## COVERAGE B. PERSONAL AND ADVERTISING INJURY LIABILITY

### 1. Insuring Agreement.

- a. We will pay those sums that the insured becomes legally obligated to pay as damages because of "personal injury" or "advertising injury" to which this insurance applies. No other obligation or liability to pay sums or perform acts or services is covered unless explicitly provided for under SUPPLEMENTARY PAYMENTS—COVERAGES A AND B. We will have the right and duty to defend any "suit" seeking those damages. But:

- (1) The amount we will pay for damages is limited as described in SECTION III — LIMITS OF INSURANCE;

- (2) We may investigate and settle any claim or "suit" at our discretion; and

- (3) Our right and duty to defend end when we have used up the applicable limit of insurance in the payment of judgments or settlements under Coverages A or B or medical expenses under Coverage C.

- b. This insurance applies to "personal injury" only if caused by an offense:

- (1) Committed in the "coverage territory" during the policy period; and
- (2) Arising out of the conduct of your business, excluding advertising, publishing, broadcasting or telecasting done by or for you.

- c. This insurance applies to "advertising injury" only if caused by an offense committed:

- (1) In the "coverage territory" during the policy period; and
- (2) In the course of advertising your goods, products or services.

### 2. Exclusions.

This insurance does not apply to:

- a. "Personal injury" or "advertising injury:"

- (1) Arising out of oral or written publication of material, if done by or at the direction of the insured with knowledge of its falsity;
- (2) Arising out of oral or written publication of material whose first publication took place before the beginning of the policy period;
- (3) Arising out of the willful violation of a penal statute or ordinance committed by or with the consent of the insured; or
- (4) For which the insured has assumed liability in a contract or agreement. This exclusion does not apply to liability for damages that the insured would have in the absence of the contract or agreement.

- b. "Advertising injury" arising out of:

- (1) Breach of contract, other than misappropriation of advertising ideas under an implied contract;
- (2) The failure of goods, products or services to conform with advertised quality or performance;
- (3) The wrong description of the price of goods, products or services; or
- (4) An offense committed by an insured whose business is advertising, broadcasting, publishing or telecasting.

## COVERAGE C. MEDICAL PAYMENTS

### 1. Insuring Agreement.

- a. We will pay medical expenses as described below for "bodily injury" caused by an accident:
  - (1) On premises you own or rent;
  - (2) On ways next to premises you own or rent; or
  - (3) Because of your operations;provided that:
  - (1) The accident takes place in the "coverage territory" and during the policy period;
  - (2) The expenses are incurred and reported to us within one year of the date of the accident; and
  - (3) The injured person submits to examination, at our expense, by physicians of our choice as often as we reasonably require.
- b. We will make these payments regardless of fault. These payments will not exceed the applicable limit of insurance. We will pay reasonable expenses for:
  - (1) First aid at the time of an accident;
  - (2) Necessary medical, surgical, x-ray and dental services, including prosthetic devices; and
  - (3) Necessary ambulance, hospital, professional nursing and funeral services.

### 2. Exclusions.

We will not pay expenses for "bodily injury:"

- a. To any insured.
- b. To a person hired to do work for or on behalf of any insured or a tenant of any insured.
- c. To a person injured on that part of premises you own or rent that the person normally occupies.
- d. To a person, whether or not an employee of any insured, if benefits for the "bodily injury" are payable or must be provided under a workers compensation or disability benefits law or a similar law.
- e. To a person injured while taking part in athletics.
- f. Included within the "products-completed operations hazard."
- g. Excluded under Coverage A.
- h. Due to war, whether or not declared, or any act or condition incident to war. War includes civil war, insurrection, rebellion or revolution.

## SUPPLEMENTARY PAYMENTS — COVERAGES A AND B

We will pay, with respect to any claim or "suit" we defend:

- 1. All expenses we incur.
- 2. Up to \$250 for cost of bail bonds required because of accidents or traffic law violations arising out of the use of any vehicle to which the Bodily Injury Liability Coverage applies. We do not have to furnish these bonds.
- 3. The cost of bonds to release attachments, but only for bond amounts within the applicable limit of insurance. We do not have to furnish these bonds.
- 4. All reasonable expenses incurred by the insured at our request to assist us in the investigation or defense of the claim or "suit," including actual loss of earnings up to \$100 a day because of time off from work.
- 5. All costs taxed against the insured in the "suit."
- 6. Pre-judgment interest awarded against the insured on that part of the judgment we pay. If we make an offer to pay the applicable limit of insurance, we will not pay any pre-judgment interest based on that period of time after the offer.
- 7. All interest on the full amount of any judgment that accrues after entry of the judgment and before we have paid, offered to pay, or deposited in court the part of the judgment that is within the applicable limit of insurance.

These payments will not reduce the limits of insurance.

## SECTION II — WHO IS AN INSURED

- 1. If you are designated in the Declarations as:
  - a. An individual, you and your spouse are insureds, but only with respect to the conduct of a business of which you are the sole owner.
  - b. A partnership or joint venture, you are an insured. Your members, your partners, and their spouses are also insureds, but only with respect to the conduct of your business.
  - c. An organization other than a partnership or joint venture, you are an insured. Your executive officers and directors are insureds, but only with respect to their duties as your officers or directors. Your stockholders are also insureds, but only with respect to their liability as stockholders.
- 2. Each of the following is also an insured:
  - a. Your employees, other than your executive officers, but only for acts within the scope of their employment by you. However, none of these employees is an insured for:

- (1) "Bodily injury" or "personal injury" to you or to a co-employee while in the course of his or her employment; or
  - (2) "Bodily injury" or "personal injury" arising out of his or her providing or failing to provide professional health care services; or
  - (3) "Property damage" to property owned or occupied by or rented or loaned to that employee, any of your other employees, or any of your partners or members (if you are a partnership or joint venture).
- b. Any person (other than your employee), or any organization while acting as your real estate manager.
  - c. Any person or organization having proper temporary custody of your property if you die, but only:
    - (1) With respect to liability arising out of the maintenance or use of that property; and
    - (2) Until your legal representative has been appointed.
  - d. Your legal representative if you die, but only with respect to duties as such. That representative will have all your rights and duties under this Coverage Part.
3. With respect to "mobile equipment" registered in your name under any motor vehicle registration law, any person is an insured while driving such equipment along a public highway with your permission. Any other person or organization responsible for the conduct of such person is also an insured, but only with respect to liability arising out of the operation of the equipment, and only if no other insurance of any kind is available to that person or organization for this liability. However, no person or organization is an insured with respect to:
    - a. "Bodily injury" to a co-employee of the person driving the equipment; or
    - b. "Property damage" to property owned by, rented to, in the charge of or occupied by you or the employer of any person who is an insured under this provision.
  4. Any organization you newly acquire or form, other than a partnership or joint venture, and over which you maintain ownership or majority interest, will be deemed to be a Named Insured if there is no other similar insurance available to that organization. However:
    - a. Coverage under this provision is afforded only until the 90th day after you acquire or form the organization or the end of the policy period, whichever is earlier;

- b. Coverage A does not apply to "bodily injury" or "property damage" that occurred before you acquired or formed the organization; and
- c. Coverage B does not apply to "personal injury" or "advertising injury" arising out of an offense committed before you acquired or formed the organization.

No person or organization is an insured with respect to the conduct of any current or past partnership or joint venture that is not shown as a Named Insured in the Declarations.

### SECTION III — LIMITS OF INSURANCE

1. The Limits of Insurance shown in the Declarations and the rules below fix the most we will pay regardless of the number of:
  - a. Insureds;
  - b. Claims made or "suits" brought; or
  - c. Persons or organizations making claims or bringing "suits."
2. The General Aggregate Limit is the most we will pay for the sum of:
  - a. Medical expenses under Coverage C; and
  - b. Damages under Coverage A and Coverage B, except damages because of injury and damage included in the "products-completed operations hazard."
3. The Products-Completed Operations Aggregate Limit is the most we will pay under Coverage A for damages because of injury and damage included in the "products-completed operations hazard."
4. Subject to 2. above, the Personal and Advertising Injury Limit is the most we will pay under Coverage B for the sum of all damages because of all "personal injury" and all "advertising injury" sustained by any one person or organization.
5. Subject to 2. or 3. above, whichever applies, the Each Occurrence Limit is the most we will pay for the sum of:
  - a. Damages under Coverage A; and
  - b. Medical expenses under Coverage C because of all "bodily injury" and "property damage" arising out of any one "occurrence."
6. Subject to 5. above, the Fire Damage Limit is the most we will pay under Coverage A for damages because of "property damage" to premises rented to you arising out of any one fire.
7. Subject to 5. above, the Medical Expense Limit is the most we will pay under Coverage C for all medical expenses because of "bodily injury" sustained by any one person.

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The limits of this Coverage Part apply separately to each consecutive annual period and to any remaining period of less than 12 months, starting with the beginning of the policy period shown in the Declarations, unless the policy period is extended after issuance for an additional period of less than 12 months. In that case, the additional period will be deemed part of the last preceding period for purposes of determining the Limits of Insurance.

**SECTION IV — COMMERCIAL GENERAL LIABILITY CONDITIONS**

**1. Bankruptcy.**

Bankruptcy or insolvency of the insured or of the insured's estate will not relieve us of our obligations under this Coverage Part.

**2. Duties In The Event Of Occurrence, Claim Or Suit.**

a. You must see to it that we are notified promptly of an "occurrence" which may result in a claim. Notice should include:

(1) How, when and where the "occurrence" took place; and

(2) The names and addresses of any injured persons and witnesses.

b. If a claim is made or "suit" is brought against any insured, you must see to it that we receive prompt written notice of the claim or "suit."

c. You and any other involved insured must:

(1) Immediately send us copies of any demands, notices, summonses or legal papers received in connection with the claim or "suit;"

(2) Authorize us to obtain records and other information;

(3) Cooperate with us in the investigation, settlement or defense of the claim or "suit;" and

(4) Assist us, upon our request, in the enforcement of any right against any person or organization which may be liable to the insured because of injury or damage to which this insurance may also apply.

d. No insureds will, except at their own cost, voluntarily make a payment, assume any obligation, or incur any expense, other than for first aid, without our consent.

**3. Legal Action Against Us.**

No person or organization has a right under this Coverage Part:

a. To join us as a party or otherwise bring us into a "suit" asking for damages from an insured; or

b. To sue us on this Coverage Part unless all of its terms have been fully complied with.

A person or organization may sue us to recover on an agreed settlement or on a final judgment against an insured obtained after an actual trial; but we will not be liable for damages that are not payable under the terms of this Coverage Part or that are in excess of the applicable limit of insurance. An agreed settlement means a settlement and release of liability signed by us, the insured and the claimant or the claimant's legal representative.

**4. Other Insurance.**

If other valid and collectible insurance is available to the insured for a loss we cover under Coverages A or B of this Coverage Part, our obligations are limited as follows:

**a. Primary Insurance**

This insurance is primary except when b. below applies. If this insurance is primary, our obligations are not affected unless any of the other insurance is also primary. Then, we will share with all that other insurance by the method described in c. below.

**b. Excess Insurance**

This insurance is excess over any of the other insurance, whether primary, excess, contingent or on any other basis:

(1) That is Fire, Extended Coverage, Builder's Risk, Installation Risk or similar coverage for "your work;"

(2) That is Fire insurance for premises rented to you; or

(3) If the loss arises out of the maintenance or use of aircraft, "autos" or watercraft to the extent not subject to Exclusion g. of Coverage A (Section I).

When this insurance is excess, we will have no duty under Coverage A or B to defend any claim or "suit" that any other insurer has a duty to defend. If no other insurer defends, we will undertake to do so, but we will be entitled to the insured's rights against all those other insurers.

When this insurance is excess over other insurance, we will pay only our share of the amount of the loss, if any, that exceeds the sum of:

(1) The total amount that all such other insurance would pay for the loss in the absence of this insurance; and

(2) The total of all deductible and self-insured amounts under all that other insurance.

2.

We will share the remaining loss, if any, with any other insurance that is not described in this Excess Insurance provision and was not bought specifically to apply in excess of the Limits of Insurance shown in the Declarations of this Coverage Part.

**c. Method of Sharing**

If all of the other insurance permits contribution by equal shares, we will follow this method also. Under this approach each insurer contributes equal amounts until it has paid its applicable limit of insurance or none of the loss remains, whichever comes first.

If any of the other insurance does not permit contribution by equal shares, we will contribute by limits. Under this method, each insurer's share is based on the ratio of its applicable limit of insurance to the total applicable limits of insurance of all insurers.

**5. Premium Audit.**

- a.** We will compute all premiums for this Coverage Part in accordance with our rules and rates.
- b.** Premium shown in this Coverage Part as advance premium is a deposit premium only. At the close of each audit period we will compute the earned premium for that period. Audit premiums are due and payable on notice to the first Named Insured. If the sum of the advance and audit premiums paid for the policy term is greater than the earned premium, we will return the excess to the first Named Insured.
- c.** The first Named Insured must keep records of the information we need for premium computation, and send us copies at such times as we may request.

**6. Representations.**

By accepting this policy, you agree:

- a.** The statements in the Declarations are accurate and complete;
- b.** Those statements are based upon representations you made to us; and
- c.** We have issued this policy in reliance upon your representations.

**7. Separation Of Insureds.**

Except with respect to the Limits of Insurance, and any rights or duties specifically assigned in this Coverage Part to the first Named Insured, this insurance applies:

- a.** As if each Named Insured were the only Named Insured; and
- b.** Separately to each insured against whom claim is made or "suit" is brought.

**8. Transfer Of Rights Of Recovery Against Others To Us.**

If the insured has rights to recover all or part of any payment we have made under this Coverage Part, those rights are transferred to us. The insured must do nothing after loss to impair them. At our request, the insured will bring "suit" or transfer those rights to us and help us enforce them.

**SECTION V — DEFINITIONS**

- 1.** "Advertising injury" means injury arising out of one or more of the following offenses:
  - a.** Oral or written publication of material that slanders or libels a person or organization or disparages a person's or organization's goods, products or services;
  - b.** Oral or written publication of material that violates a person's right of privacy;
  - c.** Misappropriation of advertising ideas or style of doing business; or
  - d.** Infringement of copyright, title or slogan.
- 2.** "Auto" means a land motor vehicle, trailer or semitrailer designed for travel on public roads, including any attached machinery or equipment. But "auto" does not include "mobile equipment."
- 3.** "Bodily injury" means bodily injury, sickness or disease sustained by a person, including death resulting from any of these at any time.
- 4.** "Coverage territory" means:
  - a.** The United States of America (including its territories and possessions), Puerto Rico and Canada;
  - b.** International waters or airspace, provided the injury or damage does not occur in the course of travel or transportation to or from any place not included in a. above; or
  - c.** All parts of the world if:
    - (1)** The injury or damage arises out of:
      - (a)** Goods or products made or sold by you in the territory described in a. above; or
      - (b)** The activities of a person whose home is in the territory described in a. above, but is away for a short time on your business; and
    - (2)** The insured's responsibility to pay damages is determined in a "suit" on the merits, in the territory described in a. above or in a settlement we agree to.

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5. "Impaired property" means tangible property, other than "your product" or "your work," that cannot be used or is less useful because:

- a. It incorporates "your product" or "your work" that is known or thought to be defective, deficient, inadequate or dangerous; or
- b. You have failed to fulfill the terms of a contract or agreement;

if such property can be restored to use by:

- a. The repair, replacement, adjustment or removal of "your product" or "your work;" or
- b. Your fulfilling the terms of the contract or agreement.

6. "Insured contract" means:

- a. A lease of premises;
- b. A sidetrack agreement;
- c. An easement or license agreement in connection with vehicle or pedestrian private railroad crossings at grade;
- d. Any other easement agreement, except in connection with construction or demolition operations on or within 50 feet of a railroad;
- e. An indemnification of a municipality as required by ordinance, except in connection with work for a municipality;
- f. An elevator maintenance agreement; or
- g. That part of any other contract or agreement pertaining to your business under which you assume the tort liability of another to pay damages because of "bodily injury" or "property damage" to a third person or organization, if the contract or agreement is made prior to the "bodily injury" or "property damage." Tort liability means a liability that would be imposed by law in the absence of any contract or agreement.

An "insured contract" does not include that part of any contract or agreement:

- a. That indemnifies an architect, engineer or surveyor for injury or damage arising out of:
  - (1) Preparing, approving or failing to prepare or approve maps, drawings, opinions, reports, surveys, change orders, designs or specifications; or
  - (2) Giving directions or instructions, or failing to give them, if that is the primary cause of the injury or damage;
- b. Under which the insured, if an architect, engineer or surveyor, assumes liability for injury or damage arising out of the insured's rendering or failing to render professional services, including those listed in a. above and supervisory, inspection or engineering services; or

c. That indemnifies any person or organization for damage by fire to premises rented or loaned to you.

7. "Loading or unloading" means the handling of property:

- a. After it is moved from the place where it is accepted for movement into or onto an aircraft, watercraft or "auto;"
- b. While it is in or on an aircraft, watercraft or "auto;" or
- c. While it is being moved from an aircraft, watercraft or "auto" to the place where it is finally delivered;

but "loading or unloading" does not include the movement of property by means of a mechanical device, other than a hand truck, that is not attached to the aircraft, watercraft or "auto."

8. "Mobile equipment" means any of the following types of land vehicles, including any attached machinery or equipment:

- a. Bulldozers, farm machinery, forklifts and other vehicles designed for use principally off public roads;
- b. Vehicles maintained for use solely on or next to premises you own or rent;
- c. Vehicles that travel on crawler treads;
- d. Vehicles, whether self-propelled or not, maintained primarily to provide mobility to permanently mounted:
  - (1) Power cranes, shovels, loaders, diggers or drills; or
  - (2) Road construction or resurfacing equipment such as graders, scrapers or rollers;
- e. Vehicles not described in a., b., c. or d. above that are not self-propelled and are maintained primarily to provide mobility to permanently attached equipment of the following types:
  - (1) Air compressors, pumps and generators, including spraying, welding, building cleaning, geophysical exploration, lighting and well servicing equipment; or
  - (2) Cherry pickers and similar devices used to raise or lower workers;
- f. Vehicles not described in a., b., c. or d. above maintained primarily for purposes other than the transportation of persons or cargo. However, self-propelled vehicles with the following types of permanently attached equipment are not "mobile equipment" but will be considered "autos:"
  - (1) Equipment designed primarily for
    - (a) Snow removal;

- (b) Road maintenance, but not construction or resurfacing;
    - (c) Street cleaning;
  - (2) Cherry pickers and similar devices mounted on automobile or truck chassis and used to raise or lower workers; and
  - (3) Air compressors, pumps and generators, including spraying, welding, building cleaning, geophysical exploration, lighting and well servicing equipment.
9. "Occurrence" means an accident, including continuous or repeated exposure to substantially the same general harmful conditions.
10. "Personal injury" means injury, other than "bodily injury," arising out of one or more of the following offenses:
- a. False arrest, detention or imprisonment;
  - b. Malicious prosecution;
  - c. Wrongful entry into, or eviction of a person from, a room, dwelling or premises that the person occupies;
  - d. Oral or written publication of material that slanders or libels a person or organization or disparages a person's or organization's goods, products or services; or
  - e. Oral or written publication of material that violates a person's right of privacy.
11. a. "Products-completed operations hazard" includes all "bodily injury" and "property damage" occurring away from premises you own or rent and arising out of "your product" or "your work" except:
- (1) Products that are still in your physical possession; or
  - (2) Work that has not yet been completed or abandoned.
- b. "Your work" will be deemed completed at the earliest of the following times:
- (1) When all of the work called for in your contract has been completed.
  - (2) When all of the work to be done at the site has been completed if your contract calls for work at more than one site.
  - (3) When that part of the work done at a job site has been put to its intended use by any person or organization other than another contractor or subcontractor working on the same project.
- Work that may need service, maintenance, correction, repair or replacement, but which is otherwise complete, will be treated as completed.
- c. This hazard does not include "bodily injury" or "property damage" arising out of:
- (1) The transportation of property, unless the injury or damage arises out of a condition in or on a vehicle created by the "loading or unloading" of it;
  - (2) The existence of tools, uninstalled equipment or abandoned or unused materials;
  - (3) Products or operations for which the classification in this Coverage Part or in our manual of rules includes products or completed operations.
12. "Property damage" means:
- a. Physical injury to tangible property, including all resulting loss of use of that property; or
  - b. Loss of use of tangible property that is not physically injured.
13. "Suit" means a civil proceeding in which damages because of "bodily injury," "property damage," "personal injury" or "advertising injury" to which this insurance applies are alleged. "Suit" includes an arbitration proceeding alleging such damages to which you must submit or submit with our consent.
14. "Your product" means:
- a. Any goods or products, other than real property, manufactured, sold, handled, distributed or disposed of by:
    - (1) You;
    - (2) Others trading under your name; or
    - (3) A person or organization whose business or assets you have acquired; and
  - b. Containers (other than vehicles), materials, parts or equipment furnished in connection with such goods or products.
- "Your product" includes warranties or representations made at any time with respect to the fitness, quality, durability or performance of any of the items included in a. and b. above.
- "Your product" does not include vending machines or other property rented to or located for the use of others but not sold.
15. "Your work" means:
- a. Work or operations performed by you or on your behalf; and
  - b. Materials, parts or equipment furnished in connection with such work or operations.
- "Your work" includes warranties or representations made at any time with respect to the fitness, quality, durability or performance of any of the items included in a. or b. above.



THE HARTFORD

COMMERCIAL GENERAL LIABILITY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## SPECIAL BROAD FORM COMMERCIAL GENERAL LIABILITY ENDORSEMENT

This endorsement modifies insurance provided under the following:

### COMMERCIAL GENERAL LIABILITY COVERAGE PART

#### 1. PERSONAL INJURY

- a. The following is added to the "personal injury" definition:
  - f. Discrimination or humiliation that results in injury to the feelings or reputation of a natural person, but only if such discrimination or humiliation is:
    - (1) Not done intentionally by or at the direction of:
      - (a) The insured; or
      - (b) Any executive officer, director, stockholder, partner or member of the insured; and
    - (2) Not directly or indirectly related to the employment, prospective employment or termination of employment of any person or persons by any insured.
- b. Exclusion a.(4) of **COVERAGE B** (Section I) is deleted.

Paragraph f. of definition 10. "personal injury" of the **DEFINITIONS** Section does not apply in the states of New York or Ohio.

This provision 1. does not apply if **COVERAGE B. PERSONAL INJURY LIABILITY** is excluded either by the provisions of the Coverage Part or by endorsement.

#### 2. MEDICAL PAYMENTS

- Subject to all the terms of **SECTION III — LIMITS OF INSURANCE**, the Medical Expense Limit is the higher of:
- a. \$10,000; or
  - b. The amount shown in the Declarations.
- This provision 2. does not apply if **COVERAGE C.**

**MEDICAL PAYMENTS** is excluded either by the provisions of the Coverage Part or by endorsement.

#### 3. IMPAIRED PROPERTY

- a. Definition 5. "impaired property" of the **DEFINITIONS** Section does not apply.
- b. Exclusions m. and n. of **COVERAGE A** (Section I) are replaced by the following:
  - m. Loss of use of tangible property which has not been physically injured or destroyed, resulting from:
    - (1) A delay in or lack of performance by you or on your behalf of any contract or agreement; or
    - (2) The failure of "your product" or "your work" to meet the level of performance, quality, fitness or durability warranted or represented by you or on your behalf.

This exclusion does not apply to loss of use of other tangible property resulting from the sudden and accidental physical injury to or destruction of:

- (1) "Your product;" or
- (2) "Your work;"

after such product or work has been put to its intended use.

- n. Damages claimed for any loss, cost or expense incurred by you or others for the loss of use, withdrawal, recall, inspection, repair, replacement, adjustment, removal or disposal of:
  - (1) "Your product;"
  - (2) "Your work;" or

# QUICK REFERENCE

## COMMERCIAL GENERAL LIABILITY COVERAGE PART

### OCCURRENCE

READ YOUR POLICY CAREFULLY

#### DECLARATIONS PAGES

Named Insured and Mailing Address  
Policy Period  
Description of Business and Location  
Coverages and Limits of Insurance

#### SECTION I — COVERAGES

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#### COMMON POLICY CONDITIONS

Cancellation  
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#### ENDORSEMENTS

These form numbers are shown on the Coverage Part-Declarations Page or on the Common Policy Declarations Page.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSMENT (Broad Form)**

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS POLICY  
COMMERCIAL AUTO COVERAGE PART  
COMMERCIAL GENERAL LIABILITY COVERAGE PART  
FARM COVERAGE PART  
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART  
LIQUOR LIABILITY COVERAGE PART  
POLLUTION LIABILITY COVERAGE PART  
OWNERS AND CONTRACTORS PROTECTIVE LIABILITY COVERAGE PART  
RAILROAD PROTECTIVE LIABILITY COVERAGE PART  
SPECIAL PROTECTIVE AND HIGHWAY LIABILITY POLICY NEW YORK DEPARTMENT OF TRANSPORTATION

1. The insurance does not apply:
  - A. Under any Liability Coverage, to "bodily injury" or "property damage":
    - (1) With respect to which an "insured" under the policy is also an insured under a nuclear energy liability policy issued by Nuclear Energy Liability Insurance Association, Mutual Atomic Energy Liability Underwriters, Nuclear Insurance Association of Canada or any of their successors, or would be an insured under any such policy but for its termination upon exhaustion of its limit of liability; or
    - (2) Resulting from the "hazardous properties" of "nuclear material" and with respect to which (a) any person or organization is required to maintain financial protection pursuant to the Atomic Energy Act of 1954, or any law amendatory thereof, or (b) the "insured" is, or had this policy not been issued would be, entitled to indemnity from the United States of America, or any agency thereof, under any agreement entered into by the United States of America, or any agency thereof, with any person or organization.
  - B. Under any Medical Payments coverage, to expenses incurred with respect to "bodily injury" resulting from the "hazardous properties" of "nuclear material" and arising out of the operation of a "nuclear facility" by any person or organization.
  - C. Under any Liability Coverage, to "bodily injury" or "property damage" resulting from the "hazardous properties" of "nuclear material," if:
    - (1) The "nuclear material" (a) is at any "nuclear facility" owned by, or operated by or on behalf of, an "insured" or (b) has been discharged or dispersed therefrom;
    - (2) The "nuclear material" is contained in "spent fuel" or "waste" at any time possessed, handled, used, processed, stored, transported or disposed of by or on behalf of an "insured;" or
    - (3) The "bodily injury" or "property damage" arises out of the furnishing by an "insured" of services, materials, parts or equipment in connection with the planning, construction, maintenance, operation or use of any "nuclear facility," but if such facility is located within the United States of America, its territories or possessions or Canada, this exclusion (3) applies only to "property damage" to such "nuclear facility" and any property thereat.
2. As used in this endorsement:

"Hazardous properties" include radioactive, toxic or explosive properties;

"Nuclear material" means "source material," "Special nuclear material" or "by-product material;"

"Source material," "special nuclear material," and "by-product material" have the meanings given them in the Atomic Energy Act of 1954 or in any law amendatory thereof;

"Spent fuel" means any fuel element or fuel component, solid or liquid, which has been used or exposed to radiation in a "nuclear reactor;"

"Waste" means any waste material (a) containing "by-product material" other than the tailings or wastes produced by the extraction or concentration of uranium or thorium from any ore processed primarily for its "source material" content, and (b) resulting from the operation by any person or organization of any "nuclear facility" included under the first two paragraphs of the definition of "nuclear facility."

"Nuclear facility" means:

- (a) Any "nuclear reactor;"
- (b) Any equipment or device designed or used for (1) separating the isotopes of uranium or plutonium, (2) processing or utilizing "spent fuel," or (3) handling, processing or packaging "waste;"

- (c) Any equipment or device used for the processing, fabricating or alloying of "special nuclear material" if at any time the total amount of such material in the custody of the "insured" at the premises where such equipment or device is located consists of or contains more than 25 grams of plutonium or uranium 233 or any combination thereof, or more than 250 grams of uranium 235;

- (d) Any structure, basin, excavation, premises or place prepared or used for the storage or disposal of "waste;"

and includes the site on which any of the foregoing is located, all operations conducted on such site and all premises used for such operations;

"Nuclear reactor" means any apparatus designed or used to sustain nuclear fission in a self-supporting chain reaction or to contain a critical mass of fissionable material;

"Property damage" includes all forms of radioactive contamination of property.

Policy Number 72 JUN JA4900**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.****EXCLUSION — POLLUTION HAZARD**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
RAILROAD PROTECTIVE LIABILITY COVERAGE PART

Exclusion f. of Coverage A. (Section 1) is replaced by the following exclusion:

We shall have no obligation:

- (1) To investigate, settle or defend any claim or suit against any insured alleging actual or threatened injury or damage of any nature or kind to persons or property which arises out of or would not have occurred but for the "pollution hazard;" or
- (2) To pay any damages, judgments, settlements, loss, costs or expenses that may be awarded or incurred;
  - (i) By reason of any such claim or suit or any such injury or damage; or:
  - (ii) In complying with any action authorized by law and relating to such injury or damage.

"Pollution hazard" means an actual exposure or threat of exposure to the corrosive, toxic or other harmful properties of any solid, liquid, gaseous or thermal:

- (1) Pollutants;
- (2) Contaminants;
- (3) Irritants; or
- (4) Toxic Substances,

including:

- (1) Smoke;
- (2) Vapors;
- (3) Soot;
- (4) Fumes;
- (5) Acids;
- (6) Alkalis; and
- (7) Waste materials consisting of or containing any of the foregoing.

ACCEPTED BY: \_\_\_\_\_

NAMED INSURED'S SIGNATURE

Policy Number 72 UUN JA4900**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.****EXCLUSION — POLLUTION HAZARD**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
RAILROAD PROTECTIVE LIABILITY COVERAGE PART

Exclusion f. of Coverage A. (Section 1) is replaced by the following exclusion:

We shall have no obligation:

- (1) To investigate, settle or defend any claim or suit against any insured alleging actual or threatened injury or damage of any nature or kind to persons or property which arises out of or would not have occurred but for the "pollution hazard;" or
- (2) To pay any damages, judgments, settlements, loss, costs or expenses that may be awarded or incurred;
  - (i) By reason of any such claim or suit or any such injury or damage; or:
  - (ii) In complying with any action authorized by law and relating to such injury or damage.

"Pollution hazard" means an actual exposure or threat of exposure to the corrosive, toxic or other harmful properties of any solid, liquid, gaseous or thermal:

- (1) Pollutants;
- (2) Contaminants;
- (3) Irritants; or
- (4) Toxic Substances,

including:

- (1) Smoke;
- (2) Vapors;
- (3) Soot;
- (4) Fumes;
- (5) Acids;
- (6) Alkalis; and
- (7) Waste materials consisting of or containing any of the foregoing.

ACCEPTED BY: \_\_\_\_\_

NAMED INSURED'S SIGNATURE

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **EXCLUSION — PRODUCTS — COMPLETED OPERATIONS HAZARD**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

This insurance does not apply to "bodily injury" or "property damage" included within the "products — completed operations hazard."

SPECIAL PROPERTY  
COVERAGE PART - DECLARATIONS

POLICY NO.: 72 UUN JA4900

THIS SPECIAL PROPERTY COVERAGE PART CONSISTS OF:

- A. THIS DECLARATIONS;
- B. SPECIAL PROPERTY - SCHEDULE OF COVERAGES;
- C. SPECIAL PROPERTY COVERAGE FORM;
- D. CAUSES OF LOSS - SPECIAL PROPERTY FORM;
- E. COMMERCIAL PROPERTY CONDITIONS;
- F. SPECIAL PROPERTY CONDITIONS; AND
- G. ANY OTHER COVERAGE FORMS, ENDORSEMENTS AND SCHEDULES ISSUED TO BE PART OF THIS COVERAGE PART AND LISTED BELOW.

DEDUCTIBLE

\$1,000. PER OCCURRENCE (UNLESS A DIFFERENT APPLICABLE DEDUCTIBLE IS  
SHOWN ELSEWHERE IN THIS COVERAGE PART)

ADVANCE PREMIUM: \$20,088.00

THIS PREMIUM WAS COMPUTED BASED ON RATES IN EFFECT AT THE TIME THIS COVERAGE PART WAS ISSUED. ON EACH RENEWAL OR ANNIVERSARY OF THE EFFECTIVE DATE OF THIS POLICY, WE WILL COMPUTE THE PREMIUM IN ACCORDANCE WITH OUR RATES AND RULES THEN IN EFFECT.

EXCEPT IN THIS DECLARATIONS, WHEN WE USE THE WORD "DECLARATIONS" IN THIS COVERAGE PART, WE MEAN "DECLARATIONS" OR THE "COMMON POLICY DECLARATIONS".

ALL SCHEDULES LISTED ON THIS DECLARATIONS ARE PART OF THIS DECLARATIONS.

FORM NUMBERS OF COVERAGE FORMS,  
CAUSES OF LOSS FORM, SCHEDULES AND  
ENDORSEMENTS THAT ARE PART OF THIS  
COVERAGE PART:

HM30040988 CP00900788 HM30050186 HM30090988 HM30100988 HM30160988  
HM30300689T HM30330988 HM30440988 HM31261185 HM31530388 IH10010986  
CP00300788  
IH12011185T ADDITIONAL INSURED

# Quick Reference Special Property Coverage Part

## READ YOUR POLICY CAREFULLY

### DECLARATIONS

- List of what makes up this Coverage Part
- Deductible
- Mortgage Holders (may be on a separate schedule)
- Premium for this Coverage Part
- List of form numbers that make up this Coverage Part

### COVERAGE FORM(S)

- Coverage
- Exclusions (Found in Causes of Loss Form)
- Limits of Insurance
- Payment Limitations
- Deductible (If Applicable)
- Loss Conditions
- Additional Conditions (If Applicable)
- Value Reporting Provisions (If Applicable)
- Optional Coverages (If Applicable)
- Definitions

### CAUSES OF LOSS FORM

- Covered Causes of Loss
- Exclusions
- Limitations
- Additional Coverage Extension (If Applicable)
- Definitions

### COMMERCIAL PROPERTY CONDITIONS

- A. Concealment, Misrepresentation and Fraud
- B. Control of Property
- C. Insurance Under Two or More Coverages
- D. Legal Action Against Us
- E. Liberalization
- F. No Benefit to Bailee
- G. Other Insurance
- H. Policy Period, Coverage Territory (See Special Property Conditions)
- I. Transfer of Rights of Recovery Against Others to Us

# COMMERCIAL PROPERTY CONDITIONS

This Coverage Part is subject to the following conditions, the Common Policy Conditions and applicable Loss Conditions and Additional Conditions in Commercial Property Coverage Forms.

## A. CONCEALMENT, MISREPRESENTATION OR FRAUD

This Coverage Part is void in any case of fraud by you as it relates to this Coverage Part at any time. It is also void if you or any other insured, at any time, intentionally conceal or misrepresent a material fact concerning:

1. This Coverage Part;
2. The Covered Property;
3. Your interest in the Covered Property; or
4. A claim under this Coverage Part.

## B. CONTROL OF PROPERTY

Any act or neglect of any person other than you beyond your direction or control will not affect this insurance.

The breach of any condition of this Coverage Part at any one or more locations will not affect coverage at any location where, at the time of loss or damage, the breach of condition does not exist.

## C. INSURANCE UNDER TWO OR MORE COVERAGES

If two or more of this policy's coverages apply to the same loss or damage, we will not pay more than the actual amount of the loss or damage.

## D. LEGAL ACTION AGAINST US

No one may bring a legal action against us under this Coverage Part unless:

1. There has been full compliance with all of the terms of this Coverage Part; and
2. The action is brought within 2 years after the date on which the direct physical loss or damage occurred.

## E. LIBERALIZATION

If we adopt any revision that would broaden the coverage under this Coverage Part without additional premium within 45 days prior to or during the policy period, the broadened coverage will immediately apply to this Coverage Part.

## F. NO BENEFIT TO BAILEE

No person or organization, other than you, having custody of Covered Property will benefit from this insurance.

## G. OTHER INSURANCE

1. You may have other insurance subject to the same plan, terms, conditions and provisions as the insurance under this Coverage Part. If you do, we will pay our share of the covered loss or damage. Our share is the proportion that the applicable Limit of Insurance under this Coverage Part bears to the Limits of Insurance of all insurance covering on the same basis.
2. If there is other insurance covering the same loss or damage, other than that described in 1. above, we will pay only for the amount of covered loss or damage in excess of the amount due from that other insurance, whether you can collect on it or not. But we will not pay more than the applicable Limit of Insurance.

## H. POLICY PERIOD, COVERAGE TERRITORY

Under this Coverage Part:

1. We cover loss or damage commencing:
  - a. During the policy period shown in the Declarations; and
  - b. Within the coverage territory.
2. The coverage territory is:
  - a. The United States of America (including its territories and possessions);
  - b. Puerto Rico; and
  - c. Canada.

## I. TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

If any person or organization to or for whom we make payment under this Coverage Part has rights to recover damages from another, those rights are transferred to us to the extent of our payment. That person or organization must do everything necessary to secure our rights and must do nothing after loss to impair them. But you may waive your rights against another party in writing:

1. Prior to a loss to your Covered Property or Covered Income.
2. After a loss to your Covered Property or Covered Income only if, at time of loss, that party is one of the following:
  - a. Someone insured by this insurance;
  - b. A business firm:
    - (1) Owned or controlled by you; or
    - (2) That owns or controls you; or
  - c. Your tenant.

This will not restrict your insurance.

Policy Number:



**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## LOSS PAYABLE PROVISIONS

This endorsement modifies insurance provided under the following:

### SPECIAL PROPERTY COVERAGE FORM SPECIAL PROPERTY POLICY

#### SCHEDULE

#### PROVISIONS APPLICABLE

| Prem.<br>No. | Description<br>of<br>Property | Loss Payee<br>(Name & Address) | Loss<br>Payable | Lender's<br>Loss Payable | Contract<br>of Sale |
|--------------|-------------------------------|--------------------------------|-----------------|--------------------------|---------------------|
|--------------|-------------------------------|--------------------------------|-----------------|--------------------------|---------------------|

The following is added to the LOSS PAYMENT Loss Condition, as indicated in the Declarations or by an "X" in the Schedule:

#### A. LOSS PAYABLE

For Covered Property in which both you and a Loss Payee shown in the Schedule or in the Declarations have an insurable interest, we will:

1. Adjust losses with you; and
2. Pay any claim for loss or damage jointly to you and the Loss Payee, as interests may appear.

#### B. LENDER'S LOSS PAYABLE

1. The Loss Payee shown in the Schedule or in the Declarations is a creditor (including a mortgageholder or trustee) with whom you

have entered a contract for the sale of Covered Property, whose interest in that Covered Property is established by such written contracts as:

- a. Warehouse receipts;
- b. A contract for deed;
- c. Bills of lading; or
- d. Financing statements.

2. For Covered Property in which both you and a Loss Payee have an insurable interest:

- a. We will pay for covered loss or damage to each Loss Payee in their order of precedence, as interests may appear.
- b. The Loss Payee has the right to receive loss payment even if the Loss Payee has started foreclosure or similar action on the Covered Property.

- c. If we deny your claim because of your acts or because you have failed to comply with the terms of this Coverage Part, the Loss Payee will still have the right to receive loss payment if the Loss Payee:

- (1) Pays any premium due under this Coverage Part at our request if you have failed to do so;
- (2) Submits a signed, sworn proof of loss within 60 days after receiving notice from us of your failure to do so; and
- (3) Has notified us of any change in ownership, occupancy or substantial change in risk known to the Loss Payee.

All of the terms of this Coverage Part will then apply directly to the Loss Payee.

- d. If we pay the Loss Payee for any loss or damage and deny payment to you because of your acts or because you have failed to comply with the terms of this Coverage Part:

- (1) The Loss Payee's rights will be transferred to us to the extent of the amount we pay; and
- (2) The Loss Payee's right to recover the full amount of the Loss Payee's claim will not be impaired.

At our option, we may pay to the Loss Payee the whole principal on the debt

plus any accrued interest. In this event, you will pay your remaining debt to us.

3. If we cancel this policy, we will give written notice to the Loss Payee at least:
  - a. 10 days before the effective date of cancellation if we cancel for your nonpayment of premium; or
  - b. 30 days before the effective date of cancellation if we cancel for any other reason.
4. If we do not renew this policy, we will give written notice to the Loss Payee at least 10 days before the expiration date of this policy.

#### C. CONTRACT OF SALE

1. The Loss Payee shown in the Schedule or in the Declarations is a person or organization you have entered a contract with for the sale of Covered Property.
2. For Covered Property in which both you and the Loss Payee have an insurable interest, we will:
  - a. Adjust losses with you; and
  - b. Pay any claim for loss or damage jointly to you and the Loss Payee, as interests may appear.
3. The following is added to the OTHER INSURANCE Commercial Property Condition:

For Covered Property that is the subject of a contract of sale, the word "you" includes the Loss Payee.



THE HARTFORD

## CAUSES OF LOSS — SPECIAL PROPERTY FORM

Words and phrases that appear in quotation marks have special meaning. Refer to Section E — Definitions.

### A. COVERED CAUSES OF LOSS

Covered Causes of Loss means RISKS OF DIRECT PHYSICAL LOSS unless the loss is:

1. Excluded in Section B.,
2. Limited in Section C., Limitations; or
3. Limited in Section D., Additional Coverage Extension — Water Damage;

that follow.

### B. EXCLUSIONS

1. We will not pay for loss or damage caused directly or indirectly by any of the following. Such loss or damage is excluded regardless of any other cause or event that contributes concurrently or in any sequence to the loss.

#### a. Ordinance or Law

The enforcement of any ordinance or law:

- (1) Regulating the construction, use or repair of any property; or
- (2) Requiring the tearing down of any property, including the cost of removing its debris.

#### b. Earth Movement

- (1) Any earth movement (other than "sinkhole collapse"), such as an earthquake, landslide, mine subsidence, or earth sinking, rising or shifting. But if loss or damage by fire or explosion results, we will pay for that resulting loss or damage.
- (2) Volcanic eruption, explosion or effusion. But if loss or damage by fire, building glass breakage or volcanic action results, we will pay for that resulting loss or damage.  
Volcanic action means direct loss or damage resulting from the eruption of a volcano when the loss or damage is caused by:

(a) Airborne volcanic blast or airborne shock waves;

(b) Ash, dust or particulate matter; or

(c) Lava flow.

All volcanic eruptions that occur within any 168-hour period will constitute a single occurrence.

Volcanic action does not include the cost to remove ash, dust or particulate matter that does not cause direct physical loss or damage to the covered property.

This exclusion does not apply to:

#### (1) Property:

(a) In transit;

(b) In the care, custody or control of your sales representatives; or

(c) On exhibition; or

(2) Computer equipment, including related component parts and "media and data"; or

(3) Coverage provided under the Fine Arts Coverage Extension.

#### c. Governmental Action

Seizure or destruction of property by order of governmental authority.

But we will pay for acts of destruction ordered by governmental authority and taken at the time of a fire to prevent its spread.

#### d. Nuclear Hazard

Nuclear reaction or radioactive contamination, however caused.

But if loss or damage by fire results, we will pay for that resulting loss or damage.

#### e. Power Failure

The failure of power or other utility service supplied to your premises, however caused, if the failure occurs away from your premises.

But if loss or damage by a Covered Cause of Loss results, we will pay for that resulting loss or damage.

**f. War and Military Action**

- (1) War, including undeclared or civil war;
- (2) Warlike action by a military force, including action in hindering or defending against an actual or expected attack, by any government, sovereign or other authority using military personnel or other agents; or
- (3) Insurrection, rebellion, revolution, usurped power, or action taken by governmental authority in hindering or defending against any of these.

**g. Water**

- (1) Flood, surface water, waves, tides, tidal waves, overflow of any body of water or their spray, all whether driven by wind or not;
- (2) Mudslide or mudflow; or
- (3) Water under the ground surface pressing on, or flowing or seeping through:
  - (a) Foundations, walls, floors or paved surfaces;
  - (b) Basements, whether paved or not; or
  - (c) Doors, windows or other openings.

But if loss or damage by fire, explosion or sprinkler leakage results, we will pay for that resulting loss or damage.

This exclusion does not apply to:

- (1) Property:
  - (a) In transit;
  - (b) In the care, custody or control of your sales representatives; or
  - (c) On exhibition;
- (3) Computer equipment, including related component parts and "media and data"; or
- (3) Coverage provided under the Fine Arts Coverage Extension.

**2. We will not pay for loss or damage caused by or resulting from any of the following:**

- a. Artificially generated electric current, including electric arcing, that disturbs electrical:
  - (1) Devices;
  - (2) Equipment;
  - (3) Appliances; or
  - (4) Wires.

But if loss or damage by fire results, we will pay for that resulting loss or damage.

This exclusion does not apply to computer equipment, including related component parts.

- b. Delay, loss of use or loss of market.
- c. Smoke, vapor or gas from agricultural smudging or industrial operations.
- d. (1) Wear and tear;
  - (2) Rust, corrosion, fungus, decay, deterioration, hidden or latent defect or any quality in property that causes it to damage or destroy itself;
  - (3) Smog;
  - (4) Settling, cracking, shrinking or expansion;
  - (5) Insects, birds, rodents or other animals;
  - (6) Mechanical breakdown, including rupture or bursting caused by centrifugal force.

This exclusion does not apply to:

- (a) Any resulting loss or damage caused by elevator collision; or
- (b) Computer equipment, including related component parts.
- (7) (a) Dampness or dryness of atmosphere;
- (b) Changes in or extremes of temperature; or
- (c) Marring or scratching;  
if the loss is to personal property.

But if loss or damage by the "specified causes of loss" or building glass breakage results, we will pay for that resulting loss or damage.

- e. Explosion of steam boilers, steam pipes, steam engines or steam turbines owned or leased by you, or operated under your control. But if loss or damage by fire or combustion explosion results, we will pay for that resulting loss or damage. We will also pay for loss or damage caused by or resulting from the explosion of gases or fuel within the furnace of any fired vessel or within the flues or passages through which the gases of combustion pass.
- f. Continuous or repeated seepage or leakage of water from within a plumbing, heating, air conditioning system, or other appliance that occurs over a period of 14 days or more.
- g. Water, other liquids, powder or molten material that leaks or flows from plumbing,

heating, air conditioning or other equipment (except fire protective systems) caused by or resulting from freezing, unless:

- (1) You take reasonable steps to maintain heat in the building or structure; or
  - (2) You drain the equipment and shut off the supply if the heat is not maintained.
- h. Dishonest or criminal acts by you, any of your partners, employees, directors, trustees, authorized representatives or anyone, other than a carrier for hire, to whom you entrust the property for any purpose:
- (1) Acting alone or in collusion with others; and
  - (2) Whether or not occurring during the hours of employment.

This exclusion does not apply to acts of destruction by your employees; but theft by employees is not covered.

- i. Voluntary parting with any property whether or not induced to do so by any fraudulent scheme, trick, device or false pretense.

But we will pay for loss to Covered Property caused by your acceptance, in good faith, of false bills of lading or shipping receipts.

- j. Rain, snow, ice or sleet to personal property in the open. This exclusion does not apply to property in the custody of a carrier for hire.

- k. Rough handling; poor or insufficient packaging or packing.

- l. Release, discharge or dispersal of "pollutants" unless the release, discharge or dispersal is itself caused by any of the "specified causes of loss". But if loss or damage by the "specified causes of loss" results, we will pay for the resulting damage caused by the "specified cause of loss".

- m. Collapse of a building or any part of a building caused by use of defective material or methods in construction, remodeling or renovation if the collapse occurs during the course of the construction, remodeling or renovation.

- n. Electrical or magnetic injury to, or disturbance or erasure of "media and data".

This exclusion does not apply to loss or damage caused by or resulting from the "specified causes of loss".

3. We will not pay for loss or damage caused by or resulting from any of the following:

- a. Weather conditions. But this exclusion only applies if weather conditions contribute in any way with a cause or event excluded in paragraph 1. above to produce the loss or damage.

- b. Acts or decisions, including the failure to act or decide, of any person, group, organization or governmental body.

- c. Faulty, inadequate or defective:

- (1) Planning, zoning, development, surveying or siting;

- (2) Design, specifications, workmanship, repair, construction, renovation, remodeling, grading or compaction;

- (3) Materials used in repair, construction, renovation, or remodeling;

- (4) Maintenance; or

- (5) Instructions, programming or data entry;

of part or all of any property on or off the "covered premises".

But if loss or damage by Covered Cause of Loss results, we will pay for that resulting loss or damage.

#### 4. Special Exclusion

The following provision applies only to Business Income and Extra Expense Coverages.

We will not pay for:

- a. Any loss caused by or resulting from:

- (1) Damage or destruction of "finished stock"; or

- (2) The time required to reproduce "finished stock".

This exclusion does not apply to Extra Expense.

- b. Any increase of loss caused by or resulting from:

- (1) Delay in rebuilding, repairing or replacing the property or resuming "operations", due to interference at the location of their building, repair or replacement by strikers or other persons; or

- (2) Suspension, lapse or cancellation of any license, lease or contract. But if the suspension, lapse or cancellation is directly caused by the suspension of "operations" we will cover such loss that affects your Business Income during the "period of restoration".

- c. Any Extra Expense caused by or resulting from suspension, lapse or cancellation of any license, lease or contract beyond the

"period of restoration".

- d. Any other consequential loss.

### C. LIMITATIONS

- 1. We will not pay for loss of or damage to:

- a. **Steam Boilers**

Steam boilers, steam pipes, steam engines or steam turbines caused by or resulting from any condition or event inside such equipment. But we will pay for loss of or damage to such equipment caused by or resulting from an explosion of gases or fuel within the furnace of any fired vessel or within the flues or passages through which the gases of combustion pass.

- b. **Hot Water Boilers**

Hot water boilers or other water heating equipment caused by or resulting from any condition or event inside such boilers or equipment, other than an explosion.

- c. **Missing Property**

Property that is missing, if there is no physical evidence to show what happened to it. An example is a shortage disclosed on taking inventory.

But this limitation does not apply to property in the custody of a carrier for hire.

- d. **Transferred Property**

Property that has been transferred to any person or to any place on the basis of unauthorized instructions.

- e. **Waterfront Property**

Fences, pavements, retaining walls, bulkheads, piers, pilings, wharves, or docks caused by or resulting from:

- (1) Impact of watercraft; or
- (2) Pressure or weight of ice or water whether driven by wind or not.

- 2. **Animals**

We will not pay for loss of or damage to animals unless caused by the "specified causes of loss" or building glass breakage. But we will pay only if they are killed or their destruction is made necessary.

- 3. **Personal Property**

We will not pay for Personal Property that has:

- 1. Shrunk, evaporated, or lost weight; or

- 2. Changed flavor, color, texture or finish; unless such loss or damage is caused by the "specified causes of loss".

### D. ADDITIONAL COVERAGE EXTENSION

#### "Water, Other Liquid, Powder or Molten Material Damage"

If covered loss or damage by water or other liquid, powder or molten material occurs, we will also pay the cost to tear out and replace any part of the real property to repair damage to the system or appliance from which the water or other substance escapes.

We will not pay the cost to repair any defect that caused the loss or damage; but we will pay the cost to repair or replace damaged parts of fire extinguishing equipment, if the damage:

- a. Results in discharge of any substance from an automatic fire protection system; or
- b. Is directly caused by freezing.

### E. DEFINITIONS

- 1. **"Specified Causes of Loss"** means the following: fire; lightning; explosion; windstorm, or hail; smoke; aircraft or vehicles (other than vehicles carrying Covered Property); riot or civil commotion; vandalism; leakage from fire extinguishing equipment; "sinkhole collapse"; volcanic action; falling objects; weight of snow, ice or sleet; "water or other liquid, powder, or molten material damage"; theft, attempted theft; or accident to a vehicle carrying Covered Property.

As used in the above definition of Specified Causes of Loss, Falling Objects does not include loss or damage to:

- a. Personal property in the open; or
- b. The interior of a building or structure, or property inside a building or structure unless the roof or an outside wall of the building or structure is first damaged by a falling object.

- 2. **"Sinkhole collapse"** means the sudden sinking or collapse of land into underground empty spaces created by the action of water on limestone or dolomite. This cause of loss does not include:

- a. The cost of filling sinkholes; or
- b. Sinking or collapse of land into man-made underground cavities.



THE HARTFORD

## SPECIAL PROPERTY COVERAGE FORM

Various provisions in this policy restrict coverage. Read the entire policy carefully to determine rights and duties and what is and is not covered.

Throughout this policy the words "you" and "your" refer to the Named Insured shown in the Declarations. The words "we", "us" and "our" refer to the Company providing this insurance.

Other words and phrases that appear in quotation marks have special meaning. Refer to SECTION I — DEFINITIONS.

### A. COVERAGE

We will pay for direct physical loss of or damage to Covered Property caused by or resulting from any Covered Cause of Loss.

#### 1. Covered Property

Covered Property, as used in this Coverage Part, means the following types of property:

##### a. Buildings at Described Premises

Buildings, meaning buildings and structures at premises described in the Declarations or schedules, including:

- (1) Permanently installed:
  - (a) Fixtures;
  - (b) Machinery; and
  - (c) Equipment;
- (2) Outdoor fixtures;
- (3) Personal property owned by you that is used to maintain or service the buildings or structures or their premises, including:
  - (a) Fire extinguishing equipment;
  - (b) Outdoor furniture;
  - (c) Floor coverings;
  - (d) Appliances used for refrigerating, ventilating, cooking, dishwashing or laundering;
  - (e) Alarm, communication and monitoring systems; and
  - (f) Lawn maintenance or snow removal equipment;
- (4) Materials, equipment and supplies used in the construction, alteration or repair of the buildings or structures;

- (5) Buildings and additions under construction, alterations and repairs to buildings;
- (6) Completed additions;
- (7) Building glass; and
- (8) The following, located on your described premises:

- (a) Radio or television towers, antennas or satellite dishes including:
  - (i) Lead-in wiring and masts;
  - (ii) Guy wires;
  - (iii) Above and below ground foundations;
  - (iv) Any other property that is permanently attached to such structures.

The value of the above and below ground foundations will not be taken into consideration in the application of the Coinsurance condition of this Coverage Part;

- (b) Awnings;
- (c) Fences; and
- (d) Signs, whether or not attached to the buildings or structures.

The most we will pay for this type of property is the applicable Limit of Insurance shown in the Declarations or schedules.

#### b. Personal Property

##### (1) Personal Property at Described Premises

Personal Property, in buildings or structures at premises described in the Declarations or schedules or in the open (or in vehicles) within 1000 feet of such premises.

The most we will pay for this type of property is the applicable Limit of Insurance shown in the Declarations or schedules.

##### (2) Personal Property at Other Premises

Personal Property at any premises not described in the Declarations or schedules. This does not include Personal

Property at any fair or exhibition or in the care, custody or control of sales representatives.

The most we will pay for this type of property is \$25,000, unless a different Limit of Insurance is shown in the Declarations or schedules.

**(3) Personal Property on Exhibition**

Personal Property, while:

(a) Temporarily on display to the public at premises you do not regularly occupy; or

(b) In transit to or from such display.

The most we will pay for this type of property is \$25,000, unless a different Limit of Insurance is shown in the Declarations or schedules.

**(4) Personal Property In Transit**

Personal Property while in due course of transit at your risk.

This does not include Personal Property in transit to or from any fair or exhibition or in the care, custody or control of your sales representatives.

The most we will pay for this type of property is \$10,000, unless a different Limit of Insurance is shown in the Declarations or schedules.

**(5) Sales Representative Samples**

(a) Samples of your stock in trade (including containers); and

(b) Similar property of others;

but only while such property is in the custody of your sales representatives, or agents, or yourself while acting as a sales representative, or while in transit between your premises and your sales representatives.

The most we will pay for this type of property is \$10,000, unless a different Limit of Insurance is shown in the Declarations or schedules.

(6) As used in this Coverage Part, Personal Property consists of the following:

(a) All personal property owned by you and used in your business;

(b) Your use interest as tenant in improvements and betterments. Improvements and betterments are fixtures, alterations, installations or additions:

(i) Made a part of the buildings or structures you occupy but do not own; and

(ii) You acquired or made at your expense but cannot legally remove;

(c) Personal Property of Others that is in your care, custody or control;

This includes property sold under an installation agreement where your responsibility continues until the property is accepted by the buyer;

(d) Building Glass for which you have a contractual responsibility as tenant, including encasement frames, alarm tape, lettering and ornamentation;

(e) Patterns, molds and dies, belonging to you or to others while in your care, custody or control.

(f) Computer Equipment, including related component parts and "Media and Data", if not covered by other insurance.

**2. Property Not Covered**

Covered Property does not include:

a. Accounts, bills, currency, deeds, evidences of debt, money, notes or securities;

b. Animals, unless owned by others and boarded by you, or if owned by you, only as "stock" while inside of buildings;

c. Automobiles held for sale;

d. Contraband, or property in the course of illegal transportation or trade;

e. The cost of excavations, grading, backfilling or filling;

f. Foundations of buildings, structures, machinery or boilers if their foundations are below:

(1) The lowest basement floor; or

(2) The surface of the ground, if there is no basement;

This paragraph does not apply to foundations of radio or television towers.

g. Land (including land on which the property is located), land values, water, growing crops, standing timber or lawns;

h. Pilings below the low water mark;

i. Property that is covered under another Coverage Form of this or any other policy in which it is more specifically described, except for the excess of the amount due (whether you can collect on it or not) from that other insurance;

j. Underground pipes, flues, drains, pilings or piers;

k. The cost to research, replace or restore the information on valuable papers and

records, including those which exist on electronic or magnetic media, except as provided in the Coverage Extensions;

l. Vehicles or self-propelled machines (including aircraft or watercraft) that:

- (1) Are licensed for use on public roads; or
- (2) Are operated principally away from your "covered premises".

This paragraph does not apply to:

- (a) Vehicles or self-propelled machines, or automobiles you manufacture, process or warehouse;
  - (b) Vehicles or self-propelled machines, other than automobiles, you hold for sale; or
  - (c) Rowboats or canoes out of the water at "covered premises";
- m. The following property while outside of buildings:
- (1) Grain, hay, straw or other crops;
  - (2) Trees, shrubs or plants except:
    - (a) When held for sale or sold but not delivered; or
    - (b) As provided in the Coverage Extensions;
- n. Property that is covered under any Ocean Marine insurance policy, whether you can collect on it or not;
- o. After delivery to customers, property that you have sold under:
- (1) Conditional sale;
  - (2) Trust agreement;
  - (3) Installment payment; or
  - (4) Other deferred payment plan;
- But this does not apply to property which you have sold under an installation agreement;
- p. Property of others for which you are responsible as a:
- (1) Carrier for hire; or
  - (2) Carloader, consolidator, broker, freight forwarder, shipping association, or other arranger of transportation.

3. **Covered Causes of Loss**

See applicable Causes of Loss Form as shown in the Declarations.

4. **Additional Coverages**

a. **Debris Removal**

- (1) We will pay your expense to remove debris of Covered Property caused by or resulting from a Covered Cause of Loss that occurs during the policy pe-

riod. The expenses will be paid only if they are reported to us in writing within 180 days of the earlier of:

- (a) The date of direct physical loss or damage; or
  - (b) The end of the policy period.
- (2) The most we will pay under this Additional Coverage is 25% of:
- (a) The amount we pay for the direct physical loss of or damage to Covered Property; plus
  - (b) The deductible in this policy applicable to that loss or damage.

But this limitation does not apply to any additional debris removal limit provided in the Limits of Insurance section.

(3) This Additional Coverage does not apply to costs to:

- (a) Extract "pollutants" from land or water; or
- (b) Remove, restore or replace polluted land or water.

b. **Pollutant Clean Up and Removal**

We will pay your expense to extract "pollutants" from land or water at the "covered premises" if the release, discharge or dispersal of the "pollutants" is caused by or results from a Covered Cause of Loss that occurs during the policy period. The expenses will be paid only if they are reported to us in writing within 180 days of the earlier of:

- (1) The date of direct physical loss or damage; or
- (2) The end of the policy period.

The most we will pay for each location under this Additional Coverage is \$25,000 for the sum of all such expenses arising out of Covered Causes of Loss occurring during each separate 12 month period of this policy.

c. **Preservation of Property**

If it is necessary to move Covered Property from your premises to preserve it from loss or damage by a Covered Cause of Loss, we will pay for any direct physical loss or damage to that property:

- (1) While it is being moved or temporarily stored at another location; and
- (2) Only if the loss or damage occurs within 30 days after the property is first moved.

d. **Fire Department Service Charge**

When the fire department is called to save or protect Covered Property from a Covered Cause of Loss, we will pay up to \$15,000 for your liability for fire department service charges:

- (1) Assumed by contract or agreement prior to loss; or
- (2) Required by local ordinance.

No Deductible applies to this Additional Coverage.

**e. Recharge of Fire Protection Equipment**

We will pay expenses you incur to recharge automatic fire protection equipment.

No deductible will apply when such equipment is discharged:

- (1) To fight a fire; or
- (2) As the result of a Covered Cause of Loss.

**f. Theft Damage**

- (1) We will pay for damage caused directly by theft or attempted theft to:

- (a) That part of any building containing Covered Property; or
- (b) Equipment within the building used to maintain or service the building.

- (2) We will not pay for damage:

- (a) Caused by fire; or
- (b) To glass or to lettering or artwork on glass.

This Additional Coverage applies only to premises where you are a tenant and are liable for such damage.

**g. Removal Permit**

If Covered Property is removed to a new premises, coverage for which is endorsed onto this Coverage Part, you may extend this insurance to include that Covered Property at each premises during the removal. Coverage at each premises will apply in the proportion that the value at each premises bears to the value of all Covered Property being removed. This permit applies up to 30 days after the effective date of such endorsement. After that, this insurance does not apply at the previous premises.

**h. Claim Expenses**

In the event of loss or damage covered by this Coverage Part, we will pay all reasonable expenses incurred by you at our request to assist us in:

- (1) The investigation of a claim or suit; or
- (2) The determination of the amount of

loss, such as taking inventory.

We will not pay for the following:

- (1) Expenses to prove that loss or damage is covered.
- (2) Expenses incurred under the Appraisal Loss Condition.
- (3) Expenses incurred for examinations under oath, even if required by us.

The most we will pay under this Additional Coverage is \$10,000.

**i. General Average and Salvage Charges**

We will pay any General Average and Salvage Charges you incur on shipments while waterborne.

**6. Coverage Extensions**

Except as otherwise provided, the following Extensions apply to property located at "covered premises" or in the open within 1,000 feet of "covered premises".

**a. Newly Acquired or Constructed Property**

- (1) You may extend the insurance that applies to Buildings to apply to:

- (a) New buildings while being built on your described premises; and
- (b) Buildings you acquire at any premises not described in the Declarations or schedules.

The most we will pay for loss or damage, in any one occurrence, under this Extension is \$500,000 unless a different Limit of Insurance is shown in the Declarations or schedules.

- (2) You may extend the insurance that applies to Personal Property to apply to that property at any premises you acquire other than at any fair or exhibition.

The most we will pay for loss or damage, in any one occurrence, under this Extension is \$250,000 unless a different Limit of Insurance is shown in the Declarations or schedules.

This Extension will not apply if there is a Limit of Insurance shown for Personal Property at Other Premises.

- (3) Insurance under these Extensions for Newly Acquired Property will end when any of the following first occurs:

- (a) This policy expires;
- (b) 180 days expire after you acquire the property; or
- (c) You report values to us.

We will charge you additional premium for values reported from the date you acquire the property.

**b. Personal Effects**

You may extend the insurance that applies to Personal Property to apply to personal effects owned by you, your officers, your partners or your employees. The most we will pay for loss or damage under this Extension is \$25,000 at each "covered premises". At our option, we may adjust the loss with and make payment to you.

**c. Trees, Shrubs and Plants**

You may extend the insurance provided by this Coverage Form to apply to loss or damage to your trees, shrubs and plants, including debris removal expenses, caused by or resulting from the following causes of loss if they are Covered Causes of Loss:

- (1) Fire;
- (2) Lightning;
- (3) Explosion;
- (4) Riot or Civil Commotion; or
- (5) Aircraft.

The most we will pay for loss or damage under this Extension is \$10,000.

**d. Valuable Papers and Records – Cost of Research**

You may extend the insurance that applies to Personal Property to apply to your costs to research, replace or restore the lost information on lost or damaged valuable papers and records, including those which exist on electronic or magnetic media, for which duplicates do not exist. The most we will pay under this Extension is \$25,000 for loss at each "covered premises".

**e. Fine Arts**

You may extend the insurance that applies to Personal Property to apply to "Fine Arts".

The most we will pay for loss or damage under this Extension is \$25,000 at each "covered premises".

Each of these Extensions is additional insurance. The values and the Limits of Insurance applicable to these Extensions will not be included in the calculations required by the Additional Condition, Coinsurance.

**B. EXCLUSIONS**

See applicable Causes of Loss Form as shown in the Declarations.

**C. LIMITS OF INSURANCE**

The most we will pay for loss or damage in any one occurrence is the smallest applicable Limit of Insurance shown in:

1. The Declarations;
2. The Schedules;
3. The Coverage Form(s); or
4. The endorsement(s).

Payments under the following Additional Coverages will not increase the applicable Limit of Insurance:

- a. Preservation of Property;
- b. Recharge of Fire Protection Equipment;
- c. Theft Damage;
- d. Removal Permit;
- e. General Average and Salvage Charges; or
- f. Debris Removal; but if:
  - (1) The sum of direct physical loss or damage and debris removal expense exceeds the Limit of Insurance; or
  - (2) The debris removal expense exceeds the amount payable under the 25% limitation in the Debris Removal Additional Coverage;we will pay up to an additional \$5,000 for each location in any one occurrence under the Debris Removal Additional Coverage.

**D. PAYMENT LIMITATIONS**

**Theft**

For loss or damage by theft, the following types of property are covered only up to the limits shown:

1. \$5000 for furs, fur garments and garments trimmed with fur.
2. \$5000 for jewelry, watches, watch movements, jewels, pearls, precious and semi-precious stones, bullion, gold, silver, platinum and other precious alloys or metals. This limit does not apply to jewelry and watches worth \$100 or less per item.
3. \$1000 for stamps, tickets and letters of credit.

**E. DEDUCTIBLE**

We will not pay for loss or damage in any one occurrence until the amount of loss or damage exceeds the Deductible shown in the Declarations or schedules. We will then pay the amount of loss or damage in excess of the deductible, up to the applicable Limit of Insurance.

**F. LOSS CONDITIONS**

The following conditions apply in addition to the Common Policy Conditions, Commercial Property Conditions and Additional Conditions.

1. **Abandonment**

There can be no abandonment of any property to us.

## **2. Appraisal**

If we and you disagree on the value of the property or the amount of loss, either may make written demand for an appraisal of the loss. In this event, each party will select a competent and impartial appraiser. The two appraisers will select an umpire. If they cannot agree, either may request that selection be made by a judge of a court having jurisdiction. The appraisers will state separately the value of the property and amount of loss. If they fail to agree, they will submit their differences to the umpire. A decision agreed to by any two will be binding. Each party will:

- a. Pay its chosen appraiser; and
- b. Bear the other expenses of the appraisal and umpire equally.

If there is an appraisal, we will still retain our right to deny the claim.

## **3. Duties In The Event Of Loss Or Damage**

You must see that the following are done in the event of loss or damage to Covered Property:

- a. Notify the police if a law may have been broken.
- b. Give us prompt notice of the loss or damage. Include a description of the property involved.
- c. As soon as possible, give us a description of how, when and where the loss or damage occurred.
- d. Take all reasonable steps to protect the Covered Property from further damage by a Covered Cause of Loss. If feasible, set the damaged property aside and in the best possible order for examination. Also keep a record of your expenses for emergency and temporary repairs, for consideration in the settlement of the claim. This will not increase the Limit of Insurance.
- e. At our request, give us complete inventories of the damaged and undamaged property. Include quantities, costs, values and amount of loss claimed.
- f. Permit us to inspect the property and records proving the loss or damage. Also permit us to take samples of damaged property for inspection, testing and analysis.
- g. If requested, permit us to question you under oath at such times as may be reasonably required about any matter relating to this insurance or your claim, including

your books and records. In such event, your answers must be signed.

- h. Send us a signed, sworn statement of loss containing the information we request to investigate the claim. You must do this within 60 days after our request. We will supply you with the necessary forms.
- i. Cooperate with us in the investigation or settlement of the claim.
- j. Promptly send us any legal papers or notices received concerning the loss or damage.
- k. Make no statement that will assume any obligation or admit any liability, for any loss or damage for which we may be liable, without our consent.

## **4. Loss Payment**

- a. In the event of loss or damage covered by this Coverage Form, at our option, we will either:
  - (1) Pay the value of lost or damaged property;
  - (2) Pay the cost of repairing or replacing the lost or damaged property;
  - (3) Take all or any part of the property at an agreed or appraised value; or
  - (4) Repair, rebuild or replace the property with other property of like kind and quality.
- b. We will give notice of our intentions within 30 days after we receive the sworn statement of loss.
- c. We will not pay you more than your financial interest in the Covered Property.
- d. We may adjust losses with the owners of lost or damaged property if other than you. If we pay the owners, such payments will satisfy your claims against us for the owners' property. We will not pay the owners more than their financial interest in the Covered Property.
- e. We may elect to defend you against suits arising from claims of owners of property. We will do this at our expense.
- f. We will pay for covered loss or damage within 30 days after we receive the sworn statement of loss, if:
  - (1) You have complied with all of the terms of this Coverage Part; and
  - (2) (a) We have reached agreement with you on the amount of loss; or

- (b) An appraisal award has been made unless we have denied the claim.

#### 5. Recovered Property

If either you or we recover any property after loss settlement, that party must give the other prompt notice. At your option, the property will be returned to you. You must then return to us the amount we paid to you for the property. We will pay recovery expenses and the expenses to repair the recovered property, subject to the Limit of Insurance.

#### 6. Pair, Sets or Parts

##### a. Pair or Set.

In case of loss to any part of a pair or set we may at our option:

- (1) Repair or replace any part to restore the pair or set to its value before the loss; or
- (2) Pay the difference between the value of the pair or set before and after the loss.

##### b. Parts

In case of loss to any part of Covered Property consisting of several parts when complete, we will only pay for the value of the lost or damaged part.

#### 7. Valuation

- a. We will determine the value of Covered Property in the event of loss or damage at Replacement Cost (without deduction for depreciation) as of the time of loss or damage, except for the following:

- (1) Property that is not actually repaired or replaced as soon as reasonably possible after the loss or damage, at the actual cash value at the time of loss or damage.
- (2) Glass at the cost of replacement with safety glazing material if required by law.
- (3) Tenant's Improvements and Betterments at:
  - (a) Replacement cost (without deduction for depreciation) of the lost or damaged property if you make repairs promptly.
  - (b) A proportion of your original cost if you do not make repairs promptly. We will determine the proportionate value as follows:
    - (i) Multiply the original cost by the number of days from the loss or damage to the expiration of the lease; and

- (ii) Divide the amount determined in (i) above by the number of days from the installation of improvements to the expiration of the lease.

If your lease contains a renewal option, the expiration of the renewal option period will replace the expiration of the lease in this procedure.

- (c) Nothing if others pay for repairs or replacement.

- (4) Valuable Papers and Records, including those which exist on electronic or magnetic media (other than prepackaged software programs), at the cost of:

- (a) Blank materials for reproducing the records; and
- (b) Labor to transcribe or copy the records when there is a duplicate.

- (5) Contents of a residence at actual cash value at the time of loss or damage.

- (6) "Fine Arts" at market value at the time of loss or damage.

- b. You may make a claim for loss or damage covered by this insurance on an actual cash value basis instead of on a replacement cost basis. In the event you elect to have loss or damage settled on an actual cash value basis, you may still make a claim on a replacement cost basis if you notify us of your intent to do so within 180 days after the loss or damage.

- c. We will not pay more for loss or damage on a replacement cost basis than the least of:

- (1) The Limit of Insurance applicable to the lost or damaged property;
- (2) The cost to replace, on the same premises, the lost or damaged property with other property:
  - (a) Of comparable material and quality; and
  - (b) Used for the same purpose; or
- (3) The amount you actually spend that is necessary to repair or replace the lost or damaged property.

#### 8. Vacancy

If the building where loss or damage occurs has been vacant for more than 60 consecutive days before that loss or damage, we will:

- a. Not pay for any loss or damage caused by any of the following even if they are Covered Causes of Loss:

- (1) Vandalism;

- (2) Leakage from fire extinguishing equipment, unless you have protected the system against freezing;
  - (3) Building glass breakage;
  - (4) "Water, other liquids, powder or molten material damage";
  - (5) Theft; or
  - (6) Attempted theft.
- b. Reduce the amount we would otherwise pay for the loss or damage by 15%.

A building is vacant when it does not contain enough personal property to conduct customary operations.

Buildings under construction are not considered vacant.

## G. ADDITIONAL CONDITIONS

The following conditions apply in addition to the Common Policy Conditions, Commercial Property Conditions and Loss Conditions.

### 1. Coinsurance

If a Coinsurance percentage is shown in the Declarations or schedules, the following condition applies.

#### a. Buildings and Personal Property at Described Premises

- (1) We will not pay the full amount of any loss if the value of Covered Property at the time of loss times the Coinsurance percentage shown for it in the Declarations or schedules is greater than the Limit of Insurance for the property.

Instead, we will determine the most we will pay using the following steps:

- (a) Multiply the value of Covered Property at the time of loss by the Coinsurance percentage;
- (b) Divide the Limit of Insurance for the property by the figure determined in step (a);
- (c) Multiply the total amount of loss, before the application of any deductible, by the figure determined in step (b); and
- (d) Subtract the deductible from the figure determined in step (c).

We will pay the amount determined in step (d) or the Limit of Insurance, whichever is less. For the remainder, you will either have to rely on other insurance or absorb the loss yourself.

- (2) If one Limit of Insurance applies to two or more separate items, this condition will apply to the total of all property to

which the limit applies.

### b. Personal Property at Other Premises

We will not pay the full amount of any loss if the total value of Personal Property at Other Premises at the time of loss times the Coinsurance percentage shown for it in the Declarations or schedules is greater than the Aggregate Value shown in the Declarations or schedules.

Instead, we will determine the most we will pay using the following steps:

- (1) Multiply the total value of Personal Property at Other Premises at the time of loss by the Coinsurance percentage;
- (2) Divide the Aggregate Value of Personal Property by the figure determined in step (1);
- (3) Multiply the total amount of the covered loss, before the application of any deductible, by the figure determined in step (2); and
- (4) Subtract the deductible from the figure determined in step (3).

But this entire Coinsurance Condition does not apply to property:

- (a) In transit;
- (b) In the care, custody or control of your sales representatives; or
- (c) On exhibition.

### 2. Mortgage Holders

- a. The term "mortgage holder" includes trustee.
- b. We will pay for covered loss of or damage to buildings or structures to each mortgage holder shown in the Declarations or schedules in their order of precedence, as interests may appear.
- c. The mortgage holder has the right to receive loss payment even if the mortgage holder has started foreclosure or similar action on the property.
- d. If we deny your claim because of your acts or because you have failed to comply with the terms of this Coverage Part, the mortgage holder will still have the right to receive loss payment if the mortgage holder:
  - (1) Pays any premium due under this Coverage Part at our request if you have failed to do so;
  - (2) Submits a signed, sworn statement of loss within 60 days after receiving notice from us of your failure to do so; and
  - (3) Has notified us of any change in own-

ership, occupancy or substantial change in risk known to the mortgage holder.

All of the terms of this Coverage Part will then apply directly to the mortgage holder.

- e. If we pay the mortgage holder for any loss or damage and deny payment to you because of your acts or because you have failed to comply with the terms of this Coverage Part:

- (1) The mortgage holder's rights under the mortgage will be transferred to us to the extent of the amount we pay; and
- (2) The mortgage holder's right to recover the full amount of the mortgage holder's claim will not be impaired.

At our option, we may pay to the mortgage holder the whole principal on the mortgage plus any accrued interest. In this event, your mortgage and note will be transferred to us and you will pay your remaining mortgage debt to us.

- f. If we cancel this policy, we will give written notice to the mortgage holder at least:

- (1) 10 days before the effective date of cancellation if we cancel for your non-payment of premium; or
- (2) 30 days before the effective date of cancellation if we cancel for any other reason.

- g. If we elect not to renew this policy, we will give written notice to the mortgage holder at least 10 days before the expiration date of this policy.

## H. OPTIONAL COVERAGES

If shown in the Declarations or schedules, the following Optional Coverages apply separately to each item.

### 1. Agreed Value

- a. The Additional Condition, Coinsurance, does not apply to Covered Property to which this Optional Coverage applies. We will pay no more for loss of or damage to that property than the proportion that the Limit of Insurance under this Coverage Part for the property bears to the Agreed Value shown for it in the Declarations or schedules.
- b. If the expiration date for this Optional Coverage shown in the Declarations or schedules is not extended, the Additional Condition, Coinsurance, is reinstated and this

Optional Coverage expires.

- c. The terms of this Optional Coverage apply only to loss or damage that occurs:

- (1) On or after the effective date of this Optional Coverage; and
- (2) Before the Agreed Value expiration date shown in the Declarations or schedules or the policy expiration date, whichever occurs first.

### 2. Inflation Guard

- a. The Limit of Insurance for property to which this Optional Coverage applies will automatically increase by the annual percentage shown in the Declarations or schedules.

- b. The amount of increase will be:

- (1) The Limit of Insurance that applied on the most recent of the policy inception date, the policy anniversary date, or any other policy change amending the Limit of Insurance, times
- (2) The percentage of annual increase shown in the Declarations, expressed as a decimal (example: 8% is .08), times
- (3) The number of days since the beginning of the current policy year or the effective date of the most recent policy change amending the Limit of Insurance, divided by 365.

### 3. Actual Cash Value

The VALUATION Loss Condition is replaced by the following:

### 7. Valuation

We will determine the value of Covered Property in the event of loss or damage at actual cash value as of the time of loss or damage, except for the following:

- a. If the Limit of Insurance for Buildings satisfies the Additional Condition, Coinsurance, and the cost to repair or replace the damaged building is \$2,500 or less, we will pay the cost of repairs or replacement. This provision does not apply to the following even when attached to the building:

- (1) Awnings or floor coverings;
- (2) Appliances for refrigerating, ventilating, cooking, dishwashing or laundering; or
- (3) Outdoor equipment or furniture.

- b. "Stock" you have sold but not delivered at the selling price less discounts and

- expenses you otherwise would have had.
- c. Glass at the cost of replacement with safety glazing material if required by law.
  - d. Tenant's Improvements and Betterments at:
    - (1) Actual cash value of the lost or damaged property if you make repairs promptly.
    - (2) A proportion of your original cost if you do not make repairs promptly. We will determine the proportionate value as follows:
      - (a) Multiply the original cost by the number of days from the loss or damage to the expiration of the lease; and
      - (b) Divide the amount determined in (a) above by the number of days from the installation of improvements to the expiration of the lease.

If your lease contains a renewal option, the expiration of the renewal option period will replace the expiration of the lease in this procedure.
    - (3) Nothing if others pay for repairs or replacement.
  - e. Valuable Papers and Records, including those which exist on electronic or magnetic media (other than prepackaged software programs), at the cost of:
    - (1) Blank materials for reproducing the records; and
    - (2) Labor to transcribe or copy the records when there is a duplicate.
  - f. Patterns, molds and dies, at replacement cost if actually replaced.

## I. DEFINITIONS

- 1. **"Covered premises"** means any premises where you have Buildings or Personal Property covered under this Coverage Part.
- 2. **"Fine Arts"** means paintings, etchings, pictures, tapestries, art glass windows, valuable rugs, statuary, marbles, bronzes, antique furniture, rarebooks, antique silver, manuscripts, porcelains, rare glass, bric-a-brac, and similar property, of rarity, historical value or artistic merit.
- 3. **"Media and Data"** means:
  - a. Electronic data processing, recording or storage media such as films, tapes, cards, discs, drums or cells; and
  - b. Data and programming records used for electronic data processing or electronically controlled equipment stored on such media.
- 4. **"Pollutants"** means any solid, liquid, gaseous or thermal irritant or contaminant, including smoke, vapor, soot, fumes, acids, alkalis, chemicals and waste. Waste includes materials to be recycled, reconditioned or reclaimed.
- 5. **"Stock"** means merchandise held in storage or for sale, raw materials and in-process or finished goods, including supplies used in their packing or shipping.
- 6. **"Water or other liquid, powder or molten material damage"** means accidental discharge or leakage of water or other substance as the direct result of the breaking or cracking of any part of a system or appliance containing water or other substance.



## Wausau Insurance Companies

### CALIFORNIA INSURANCE GUARANTEE ASSOCIATION SURCHARGE

We would like to provide you with an explanation of the "insolvency" surcharge included on the ENCLOSED INVOICE:

Occasionally, a property and liability insurance company becomes insolvent. When this happens, that company's policyholders can be left without coverage, and persons with claims against those policyholders can find themselves without a viable source of possible compensation. For the protection of the public in such situations, the insurance industry has cooperated with the California Insurance Department to create a "guaranty" fund.

To finance this fund, the California Legislature has passed a law which requires a special surcharge on all new and renewed property and liability insurance policies sold with California exposure.

The surcharge for 1988 is 0.8% of premium on auto insurance policies, and 1.0% of premium on other coverages such as workers compensation, commercial property and liability policies. These surcharge percentages may change each year and will end when claims against insolvent insurers are paid.

We certainly do not underestimate the significance of any cost increase. However, we agree with the Legislature and the Department of Insurance that the surcharge is a fair and open way of assuring California policyholders of protection against insurance company insolvencies.

268-01

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Document (K)

CC Form **1120**  
Department of the Treasury  
Internal Revenue Service

# U.S. Corporation Income Tax Return

For calendar year 1988 or other tax year beginning  
ending

OMB. No. 1545-0123

## 1988

|                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                        |                                                                                                                |                               |                                                                              |                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|-------------------------------|------------------------------------------------------------------------------|-------------------------------------------------|
| Check if a-<br>A Consolidated return <input type="checkbox"/><br>B Personal holding co. <input type="checkbox"/><br>C Personal service corp. (as defined in Temp. Regs. sec. 1.441-4T)-see instructions <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                        | Name<br><b>MERCURY AEROSPACE, INC.</b>                                                                         |                               | D Employer identification number<br><b>95-4114492</b>                        |                                                 |
|                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                        | Number and street (or P. O. box number if mail is not delivered to street address)<br><b>11800 SHERMAN WAY</b> |                               | E Date incorporated<br><b>7/17/87</b>                                        |                                                 |
|                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                        | City or town, state, and ZIP code<br><b>NO HOLLYWOOD CA 91605</b>                                              |                               | F Total assets (see Specific Inst.)<br>Dollars Cents<br><b>\$ 2,769,966.</b> |                                                 |
| G Check applicable boxes: (1) <input type="checkbox"/> Initial return (2) <input type="checkbox"/> Final return (3) <input type="checkbox"/> Change in address                                                                   |                                                                                                                                                                                                                                                                                                                        |                                                                                                                |                               | S <b>2,769,966.</b>                                                          |                                                 |
| Income                                                                                                                                                                                                                           | 1a Gross receipts or sales                                                                                                                                                                                                                                                                                             | <b>3,469,106.</b>                                                                                              | b Less returns and allowances | <b>138,345.</b>                                                              | c Bal <b>3,330,761.</b>                         |
|                                                                                                                                                                                                                                  | 2 Cost of goods sold and/or operations (Schedule A)                                                                                                                                                                                                                                                                    |                                                                                                                |                               |                                                                              | 2 <b>2,814,802.</b>                             |
|                                                                                                                                                                                                                                  | 3 Gross profit (line 1c less line 2)                                                                                                                                                                                                                                                                                   |                                                                                                                |                               |                                                                              | 3 <b>515,959.</b>                               |
|                                                                                                                                                                                                                                  | 4 Dividends (Schedule C, line 19)                                                                                                                                                                                                                                                                                      |                                                                                                                |                               |                                                                              | 4                                               |
|                                                                                                                                                                                                                                  | 5 Interest                                                                                                                                                                                                                                                                                                             |                                                                                                                |                               |                                                                              | 5 <b>2,315.</b>                                 |
|                                                                                                                                                                                                                                  | 6 Gross rents                                                                                                                                                                                                                                                                                                          |                                                                                                                |                               |                                                                              | 6                                               |
|                                                                                                                                                                                                                                  | 7 Gross royalties                                                                                                                                                                                                                                                                                                      |                                                                                                                |                               |                                                                              | 7                                               |
|                                                                                                                                                                                                                                  | 8 Capital gain net income (attach separate Schedule D)                                                                                                                                                                                                                                                                 |                                                                                                                |                               |                                                                              | 8                                               |
|                                                                                                                                                                                                                                  | 9 Net gain or (loss) from Form 4797, Part II, line 18 (attach Form 4797)                                                                                                                                                                                                                                               |                                                                                                                |                               |                                                                              | 9                                               |
|                                                                                                                                                                                                                                  | 10 Other income (see instructions - attach schedule)                                                                                                                                                                                                                                                                   | <b>SEE STATEMENT</b>                                                                                           | <b>4</b>                      |                                                                              | 10 <b>34,600.</b>                               |
|                                                                                                                                                                                                                                  | 11 TOTAL income - Add lines 3 through 10 and enter here                                                                                                                                                                                                                                                                |                                                                                                                |                               |                                                                              | 11 <b>552,874.</b>                              |
| Deductions (See instructions for limitations on deductions)                                                                                                                                                                      | 12 Compensation of officers (Schedule E)                                                                                                                                                                                                                                                                               |                                                                                                                |                               |                                                                              | 12                                              |
|                                                                                                                                                                                                                                  | 13a Salaries and wages                                                                                                                                                                                                                                                                                                 | <b>221,163.</b>                                                                                                | b Less jobs credit            |                                                                              | c Bal <b>221,163.</b>                           |
|                                                                                                                                                                                                                                  | 14 Repairs                                                                                                                                                                                                                                                                                                             |                                                                                                                |                               |                                                                              | 14                                              |
|                                                                                                                                                                                                                                  | 15 Bad debts                                                                                                                                                                                                                                                                                                           |                                                                                                                |                               |                                                                              | 15                                              |
|                                                                                                                                                                                                                                  | 16 Rents                                                                                                                                                                                                                                                                                                               |                                                                                                                |                               |                                                                              | 16 <b>46,525.</b>                               |
|                                                                                                                                                                                                                                  | 17 Taxes                                                                                                                                                                                                                                                                                                               | <b>SEE STATEMENT</b>                                                                                           | <b>5</b>                      |                                                                              | 17 <b>36,273.</b>                               |
|                                                                                                                                                                                                                                  | 18 Interest                                                                                                                                                                                                                                                                                                            |                                                                                                                |                               |                                                                              | 18                                              |
|                                                                                                                                                                                                                                  | 19 Contributions (see instructions for 10% limitation)                                                                                                                                                                                                                                                                 |                                                                                                                |                               |                                                                              | 19                                              |
|                                                                                                                                                                                                                                  | 20 Depreciation (attach Form 4562)                                                                                                                                                                                                                                                                                     | 20 <b>193,269.</b>                                                                                             |                               |                                                                              |                                                 |
|                                                                                                                                                                                                                                  | 21 Less depreciation claimed in Schedule A and elsewhere on return                                                                                                                                                                                                                                                     | 21a <b>167,601.</b>                                                                                            |                               |                                                                              | 21b <b>25,668.</b>                              |
|                                                                                                                                                                                                                                  | 22 Depletion                                                                                                                                                                                                                                                                                                           |                                                                                                                |                               |                                                                              | 22                                              |
| 23 Advertising                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                        |                                                                                                                |                               | 23                                                                           |                                                 |
| 24 Pension, profit-sharing, etc., plans                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                        |                                                                                                                |                               | 24                                                                           |                                                 |
| 25 Employee benefit programs                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                        |                                                                                                                |                               | 25                                                                           |                                                 |
| 26 Other deductions (attach schedule)                                                                                                                                                                                            | <b>SEE STATEMENT</b>                                                                                                                                                                                                                                                                                                   | <b>6</b>                                                                                                       |                               | 26 <b>265,430.</b>                                                           |                                                 |
| 27 Total deductions - Add lines 12 through 26 and enter here                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                        |                                                                                                                |                               | 27 <b>595,059.</b>                                                           |                                                 |
| 28 Taxable income before net operating loss deduction and special deductions (line 11 less line 27)                                                                                                                              |                                                                                                                                                                                                                                                                                                                        |                                                                                                                |                               | 28 <b>-42,185.</b>                                                           |                                                 |
| 29 Less: a Net operating loss deduction <b>SEE STMT</b>                                                                                                                                                                          | 29a <b>48,304.</b>                                                                                                                                                                                                                                                                                                     |                                                                                                                |                               |                                                                              |                                                 |
| b Special deductions (Schedule C, line 20)                                                                                                                                                                                       | 29b                                                                                                                                                                                                                                                                                                                    |                                                                                                                |                               | 29c <b>48,304.</b>                                                           |                                                 |
| 30 Taxable income (line 28 less line 29c)                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                        |                                                                                                                |                               | 30 <b>-90,489.</b>                                                           |                                                 |
| 31 Total tax (Schedule J)                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                        |                                                                                                                |                               | 31 <b>0.</b>                                                                 |                                                 |
| Tax and Payments                                                                                                                                                                                                                 | 32 Payments: a 1987 overpayment credited to 1988                                                                                                                                                                                                                                                                       | 32a                                                                                                            |                               |                                                                              |                                                 |
|                                                                                                                                                                                                                                  | b 1988 estimated tax payments                                                                                                                                                                                                                                                                                          | 32b                                                                                                            |                               |                                                                              |                                                 |
|                                                                                                                                                                                                                                  | c Less 1988 refund applied for on Form 4466                                                                                                                                                                                                                                                                            | 32c                                                                                                            |                               |                                                                              |                                                 |
|                                                                                                                                                                                                                                  | d Bal                                                                                                                                                                                                                                                                                                                  | 32d                                                                                                            | <b>0.</b>                     |                                                                              |                                                 |
|                                                                                                                                                                                                                                  | e Tax deposited with Form 7004                                                                                                                                                                                                                                                                                         | 32e                                                                                                            |                               |                                                                              |                                                 |
|                                                                                                                                                                                                                                  | f Credit from regulated investment companies (attach Form 2439)                                                                                                                                                                                                                                                        | 32f                                                                                                            |                               |                                                                              |                                                 |
|                                                                                                                                                                                                                                  | g Credit for federal tax on fuels (attach Form 4136)                                                                                                                                                                                                                                                                   | 32g                                                                                                            |                               |                                                                              | 32h                                             |
|                                                                                                                                                                                                                                  | 33 Enter any penalty for underpayment of estimated tax - check <input type="checkbox"/> if Form 2220 is attached                                                                                                                                                                                                       |                                                                                                                |                               |                                                                              | 33                                              |
|                                                                                                                                                                                                                                  | 34 Tax due - If the total of lines 31 and 33 is larger than line 32h, enter amount owed                                                                                                                                                                                                                                |                                                                                                                |                               |                                                                              | 34                                              |
|                                                                                                                                                                                                                                  | 35 Overpayment - If line 32h is larger than the total of lines 31 and 33, enter amount overpaid                                                                                                                                                                                                                        |                                                                                                                |                               |                                                                              | 35                                              |
|                                                                                                                                                                                                                                  | 36 Enter amount of line 35 you want: Credited to 1989 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>                                                                                                                                                                                         |                                                                                                                |                               |                                                                              | 36                                              |
| Please Sign Here                                                                                                                                                                                                                 | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. |                                                                                                                |                               |                                                                              |                                                 |
|                                                                                                                                                                                                                                  | Signature of officer <b>Martin Garavito</b> Date <b>SEP 8 - 1988</b> Title <b>PRESIDENT</b>                                                                                                                                                                                                                            |                                                                                                                |                               |                                                                              |                                                 |
| Paid Preparer's Use Only                                                                                                                                                                                                         | Firm's name (or yours, if self-employed) and address<br><b>BDO SEIDMAN<br/>9100 WILSHIRE BLVD.<br/>BEVERLY HILLS, CALIF.</b>                                                                                                                                                                                           |                                                                                                                |                               |                                                                              | Check if self-employed <input type="checkbox"/> |
|                                                                                                                                                                                                                                  | E.I. No. <b>13-5381590</b>                                                                                                                                                                                                                                                                                             |                                                                                                                |                               |                                                                              | ZIP code <b>90212</b>                           |

**Application for Automatic Extension of Time  
To File Corporation Income Tax Return**

OMB No. 1545-0233  
Expires 8-31-90

Name of corporation

Employer identification number

MERCURY AEROSPACE, INC.

95-4114492

Number and street

11800 SHERMAN WAY

City or town, state, and ZIP code

NO. HOLLYWOOD, CA 91605

Check type of return to be filed:

- |                                               |                                        |                                       |                                         |                                     |
|-----------------------------------------------|----------------------------------------|---------------------------------------|-----------------------------------------|-------------------------------------|
| <input checked="" type="checkbox"/> Form 1120 | <input type="checkbox"/> Form 1120F    | <input type="checkbox"/> Form 1120L   | <input type="checkbox"/> Form 1120-POL  | <input type="checkbox"/> Form 1120S |
| <input type="checkbox"/> Form 1120-A          | <input type="checkbox"/> Form 1120-FSC | <input type="checkbox"/> Form 1120-ND | <input type="checkbox"/> Form 1120-REIT | <input type="checkbox"/> Form 990-C |
| <input type="checkbox"/> Form 1120-DF         | <input type="checkbox"/> Form 1120-H   | <input type="checkbox"/> Form 1120-PC | <input type="checkbox"/> Form 1120-RIC  | <input type="checkbox"/> Form 990-T |

**Form 1120F filers:** Check here ☐ if you do not have an office or place of business in the U.S.

**1a** I request an automatic 6-month extension of time until SEPTEMBER 15, 19 89, to file the income tax return of the corporation named above for ☒ calendar year 19 88 or ☐ tax year beginning ..... 19 ..... and ending ..... 19 .....

**b** If this tax year is for less than 12 months, check reason:

- ☐ Initial return ☐ Final return ☐ Change in accounting period ☐ Consolidated return to be filed

**2** Does this application also cover subsidiaries to be included in a consolidated return? . . . . . ☐ Yes ☒ No  
If "Yes," complete the following:

| Name and address of each member of the affiliated group | Employer identification number | Tax period |
|---------------------------------------------------------|--------------------------------|------------|
|                                                         |                                |            |
|                                                         |                                |            |
|                                                         |                                |            |
|                                                         |                                |            |
|                                                         |                                |            |
|                                                         |                                |            |
|                                                         |                                |            |
|                                                         |                                |            |
|                                                         |                                |            |

**3** Tentative tax (see instructions) . . . . .

**4 Credits:** **a** Overpayment from prior year allowed as a credit . . . . .

**b** Estimated tax payments (deposits) for the tax year . . . . .

**c** Less refund of estimated tax for the tax year applied for on Form 4466 ( ) . . . . .

**d** Credit from regulated investment companies and credit for overpaid windfall profit tax . . . . .

**e** Credit for Federal tax on gasoline and special fuels . . . . .

**5** Total—Add lines 4a through 4e. . . . .

**6** Balance due—Subtract line 5 from line 3. Deposit this amount with a Federal Tax Deposit (FTD) Coupon (see instructions). . . . .

NONE

NONE

NONE

**Signature.**—Under penalties of perjury, I declare that I have been authorized by the above-named corporation to make this application, and to the best of my knowledge and belief, the statements made are true, correct, and complete.

Alida M. Adamcik  
(Signature of officer or agent)

CPA  
(Title)

3/8/89  
(Date)

95-4114492

Form 1120 (1988)

Page 2

**Schedule A** Cost of Goods Sold and/or Operations (See instructions for line 2, page 1.)

|    |                                                                                                       |    |            |
|----|-------------------------------------------------------------------------------------------------------|----|------------|
| 1  | Inventory at beginning of year . . . . .                                                              | 1  | 901,635.   |
| 2  | Purchases . . . . .                                                                                   | 2  | 478,170.   |
| 3  | Cost of labor . . . . .                                                                               | 3  | 1,655,852. |
| 4a | Additional section 263A costs (attach schedule) . . . . .                                             | 4a | 33,552.    |
| b  | Other costs (attach schedule) . . . . . SEE STATEMENT 2                                               | 4b | 1,009,487. |
| 5  | Total - Add lines 1 through 4b. . . . .                                                               | 5  | 4,078,696. |
| 6  | Inventory at end of year . . . . .                                                                    | 6  | 1,263,894. |
| 7  | Cost of goods sold and/or operations - Line 5 less line 6. Enter here and on line 2, page 1 . . . . . | 7  | 2,814,802. |

**8 a** Check all methods used for valuing closing inventory:

- (i) ☐ Cost (ii) ☒ Lower of cost or market as described in Regulations section 1.471-4 (See instructions)  
 (iii) ☐ Writedown of "subnormal" goods as described in Regulations section 1.471-2(c) (See instructions)  
 (iv) ☐ Other (Specify method used and attach explanation.) ▶

**b** Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970). ☐**c** If the LIFO inventory method was used for this tax year, enter percentage (or amounts) of closing inventory computed under LIFO 8c **d** Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the corporation? ☒ Yes ☐ No**e** Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation ☐ Yes ☒ No**Schedule C** Dividends and Special Deductions (See Schedule C instructions.)

|    | (a) Dividends received                                                                                                                                   | (b) %       | (c) Special deductions: multiply (a) x (b) |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------|
| 1  | Dividends from less-than-20%-owned domestic corporations that are subject to the 70% deduction (other than debt-financed stock) . . . . .                | 70          |                                            |
| 2  | Dividends from 20%-or-more-owned domestic corporations that are subject to the 80% deduction (other than debt-financed stock) . . . . .                  | 80          |                                            |
| 3  | Dividends on debt-financed stock of domestic and foreign corporations (section 246A) . . . . .                                                           | See Instrs. |                                            |
| 4  | Dividends on certain preferred stock of less-than-20%-owned public utilities . . . . .                                                                   | 41.176      |                                            |
| 5  | Dividends on certain preferred stock of 20%-or-more-owned public utilities . . . . .                                                                     | 47.059      |                                            |
| 6  | Dividends from less-than-20%-owned foreign corporations and certain FSCs that are subject to the 70% deduction . . . . .                                 | 70          |                                            |
| 7  | Dividends from 20%-or-more-owned foreign corporations and certain FSCs that are subject to the 80% deduction . . . . .                                   | 80          |                                            |
| 8  | Dividends from wholly-owned foreign subsidiaries subject to the 100% deduction (section 245(b)) . . . . .                                                | 100         |                                            |
| 9  | Total - Add lines 1 through 8. See instructions for limitation . . . . .                                                                                 |             |                                            |
| 10 | Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958 . . . . . | 100         |                                            |
| 11 | Dividends from certain FSCs that are subject to the 100% deduction (section 245(c)(1)) . . . . .                                                         | 100         |                                            |
| 12 | Dividends from affiliated group members subject to the 100% deduction (section 243(a)(3)) . . . . .                                                      | 100         |                                            |
| 13 | Other dividends from foreign corporations not included in lines 3, 6, 7, 8, and 11 . . . . .                                                             |             |                                            |
| 14 | Income from controlled foreign corporations under subpart F (attach Forms 5471) . . . . .                                                                |             |                                            |
| 15 | Foreign dividend gross-up (section 78) . . . . .                                                                                                         |             |                                            |
| 16 | IC-DISC and former DISC dividends not included in lines 1, 2, and/or 3 (section 246(d)) . . . . .                                                        |             |                                            |
| 17 | Other dividends . . . . .                                                                                                                                |             |                                            |
| 18 | Deduction for dividends paid on certain preferred stock of public utilities . . . . .                                                                    |             |                                            |
| 19 | Total dividends - Add lines 1 through 17. Enter here and on line 4, page 1. ▶                                                                            |             |                                            |
| 20 | Total deductions - Add lines 9, 10, 11, 12, and 18. Enter here and on line 29b, page 1. ▶                                                                |             |                                            |

**Schedule E** Compensation of Officers (See instructions for line 12, page 1.)

Complete Schedule E only if total receipts (line 1a, plus lines 4 through 10, of page 1, Form 1120) are \$150,000 or more.

| (a) Name of officer | (b) Social security number                                                             | (c) Percent of time devoted to business | Percent of corporation stock owned |               | (f) Amount of compensation |
|---------------------|----------------------------------------------------------------------------------------|-----------------------------------------|------------------------------------|---------------|----------------------------|
|                     |                                                                                        |                                         | (d) Common                         | (e) Preferred |                            |
| 1                   |                                                                                        | %                                       | %                                  | %             |                            |
|                     |                                                                                        | %                                       | %                                  | %             |                            |
|                     |                                                                                        | %                                       | %                                  | %             |                            |
|                     |                                                                                        | %                                       | %                                  | %             |                            |
|                     |                                                                                        | %                                       | %                                  | %             |                            |
|                     |                                                                                        | %                                       | %                                  | %             |                            |
| 2                   | Total compensation of officers . . . . .                                               |                                         |                                    |               |                            |
| 3                   | Less: Compensation of officers claimed in Schedule A and elsewhere on return . . . . . |                                         |                                    |               |                            |
| 4                   | Compensation of officers deducted on line 12, page 1 . . . . .                         |                                         |                                    |               |                            |

**Schedule J** Tax Computation

|     |                                                                                                                                                                                                                                                                                                 |                          |    |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----|
| 1   | Check if you are a member of a controlled group (see sections 1561 and 1563).                                                                                                                                                                                                                   | <input type="checkbox"/> |    |
| 2   | If line 1 is checked:                                                                                                                                                                                                                                                                           |                          |    |
| a   | Enter your share of the \$50,000 and \$25,000 taxable income bracket amounts (in that order):<br>(i) \$ <u>                    </u> (ii) \$ <u>                    </u>                                                                                                                         |                          |    |
| b   | Enter your share of the additional 5% tax (not to exceed \$11,750) \$ <u>                    </u>                                                                                                                                                                                               |                          |    |
| 3   | Income tax (See instructions to figure the tax). Check this box if the corporation is a qualified personal service corporation <input type="checkbox"/>                                                                                                                                         | 3                        | 0. |
| 4 a | Foreign tax credit (attach Form 1118)                                                                                                                                                                                                                                                           | 4a                       |    |
| b   | Possessions tax credit (attach Form 5735)                                                                                                                                                                                                                                                       | 4b                       |    |
| c   | Orphan drug credit (attach Form 6765)                                                                                                                                                                                                                                                           | 4c                       |    |
| d   | Credit for fuel produced from a nonconventional source                                                                                                                                                                                                                                          | 4d                       |    |
| e   | General business credit. Enter here and check which forms are attached:<br><input type="checkbox"/> Form 3800 <input type="checkbox"/> Form 3468 <input type="checkbox"/> Form 5884<br><input type="checkbox"/> Form 6478 <input type="checkbox"/> Form 6765 <input type="checkbox"/> Form 8586 | 4e                       |    |
| f   | Credit for prior year minimum tax (attach Form 8301)                                                                                                                                                                                                                                            | 4f                       |    |
| 5   | Total - Add lines 4a through 4f                                                                                                                                                                                                                                                                 | 5                        | 0. |
| 6   | Line 3 less line 5                                                                                                                                                                                                                                                                              | 6                        | 0. |
| 7   | Personal holding company tax (attach Schedule PH (Form 1120))                                                                                                                                                                                                                                   | 7                        |    |
| 8   | Recapture taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611                                                                                                                                                                                           | 8                        |    |
| 9 a | Alternative minimum tax (attach Form 4626)                                                                                                                                                                                                                                                      | 9a                       |    |
| b   | Environmental tax (attach Form 4626)                                                                                                                                                                                                                                                            | 9b                       |    |
| 10  | Total tax - Add lines 6 through 9b. Enter here and on line 31, page 1.                                                                                                                                                                                                                          | 10                       | 0. |

**Additional Information** (See instruction F.)**H** Refer to the list in the instructions and state the principal:

- (1) Business activity code no. 3998  
(2) Business activity MANUFACTURING  
(3) Product or service FASTENERS

**I** (1) Did the corporation at the end of the tax year own, directly or indirectly, 50% or more of the voting stock of a domestic corporation? (For rules of attribution, see section 267(c).) If "Yes," attach a schedule showing: (a) name, address, and identifying number; (b) percentage owned; (c) taxable income or (loss) before NOL and special deductions of such corporation for the tax year ending with or within your tax year.

(2) Did any individual, partnership, corporation, estate, or trust at the end of the tax year own, directly or indirectly, 50% or more of the corporation's voting stock? (For rules of attribution, see section 267(c).) If "Yes," complete (a) through (c).

(a) Attach a schedule showing name, address, and identifying number.

(b) Enter percentage owned SEE STMT 1

(c) Was the owner of such voting stock a person other than a U.S. person? **Note:** If "Yes," the corporation may have to file Form 5472.

If "Yes," enter owner's country SEE STMT 1

**J** Was the corporation a U.S. shareholder of any controlled foreign corporation? (See sections 951 and 957.)

If "Yes," attach Form 5471 for each such corporation.

**K** At any time during the tax year, did the corporation have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? (See instruction F and filing requirements for form TD F 90-22.1.) If "Yes," enter name of foreign country                     

**L** Was the corporation the grantor of, or transferor to, a foreign trust which existed during the current tax year, whether or not the corporation has any beneficial interest in it? If "Yes," the corporation may have to file Forms 3520, 3520-A, or 926.

**M** During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? (See sections 301 and 316.) If "Yes," file Form 5452. If this is a consolidated return, answer here for parent corporation and on Form 851, Affiliations Schedule, for each subsidiary.

**N** During this tax year did the corporation maintain any part of its accounting/tax records on a computerized system?

**O** Check method of accounting:

- (1) ☐ Cash (2) ☒ Accrual  
(3) ☐ Other (specify)

**P** Check this box if the corporation issued publicly offered debt instruments with original issue discount. If so, the corporation may have to file Form 8281.

**Q** Enter the amount of tax-exempt interest received or accrued during the tax year 0.

**R** Enter the number of shareholders at the end of the tax year if there were 35 or fewer shareholders 1

Form 1120 (1988)

Page 4

**Schedule L** Balance Sheets

|                                                  | Beginning of tax year |            | End of tax year |            |
|--------------------------------------------------|-----------------------|------------|-----------------|------------|
|                                                  | (a)                   | (b)        | (c)             | (d)        |
| <b>ASSETS</b>                                    |                       |            |                 |            |
| 1 Cash                                           |                       | 65,429.    |                 | 111,539.   |
| 2 Trade notes and accounts receivable            | 358,158.              |            | 572,331.        |            |
| a Less allowance for bad debts                   |                       | 358,158.   |                 | 572,331.   |
| 3 Inventories                                    |                       | 868,318.   |                 | 1,251,815. |
| 4 Federal and state government obligations       |                       |            |                 |            |
| 5 Other current assets <b>STMT 9</b>             |                       | 15,000.    |                 | 32,114.    |
| 6 Loans to stockholders                          |                       |            |                 |            |
| 7 Mortgage and real estate loans                 |                       |            |                 |            |
| 8 Other investments                              |                       |            |                 |            |
| 9 Buildings and other depreciable assets         | 536,086.              |            | 1,027,438.      |            |
| a Less accumulated depreciation                  | 50,003.               | 486,083.   | 225,271.        | 802,167.   |
| 10 Depletable assets                             |                       |            |                 |            |
| a Less accumulated depletion                     |                       |            |                 |            |
| 11 Land (net of any amortization)                |                       |            |                 |            |
| 12 Intangible assets (amortizable only)          |                       |            |                 |            |
| a Less accumulated amortization                  |                       |            |                 |            |
| 13 Other assets                                  |                       |            |                 |            |
| 14 Total assets                                  |                       | 1,792,988. |                 | 2,769,966. |
| <b>LIABILITIES AND STOCKHOLDERS' EQUITY</b>      |                       |            |                 |            |
| 15 Accounts payable                              |                       | 157,423.   |                 | 343,963.   |
| 16 Mtgs., notes, bonds payable in less than 1 yr |                       |            |                 |            |
| 17 Other current liabilities <b>STMT 10</b>      |                       | 54,222.    |                 | 74,798.    |
| 18 Loans from stockholders                       |                       |            |                 |            |
| 19 Mtgs., notes, bonds payable in 1 yr. or more  |                       |            |                 |            |
| 20 Other liabilities <b>STMT 11</b>              |                       | 483,500.   |                 | 1,311,719. |
| 21 Capital stock: a Preferred stock              |                       |            |                 |            |
| b Common stock                                   | 100,000.              | 100,000.   | 100,000.        | 100,000.   |
| 22 Paid-in or capital surplus                    |                       | 1,100,000. |                 | 1,100,000. |
| 23 Retained earnings                             |                       |            |                 |            |
| Appropriated                                     |                       |            |                 |            |
| 24 Retained earnings - Unappropriated            |                       | -102,157.  |                 | -160,514.  |
| 25 Less cost of treasury stock                   |                       |            |                 |            |
| 26 Total liabilities and stockholders' equity    |                       | 1,792,988. |                 | 2,769,966. |

**Schedule M-1** Reconciliation of Income per Books With Income per Return

(You are not required to complete this schedule if the total assets on line 14, column (d), of Schedule L are less than \$25,000.)

|                                                                              |          |                                                                                     |          |
|------------------------------------------------------------------------------|----------|-------------------------------------------------------------------------------------|----------|
| 1 Net income per books                                                       | -58,357. | 7 Income recorded on books this year not included                                   |          |
| 2 Federal income tax                                                         |          | In this return (itemize)                                                            |          |
| 3 Excess of capital losses over capital gains                                |          | a Tax-exempt interest \$                                                            |          |
| 4 Income subject to tax not recorded on books this year (itemize)            | 13,653.  |                                                                                     |          |
| 5 Expenses recorded on books this year not deducted in this return (itemize) |          | 8 Deductions in this tax return not charged against book income this year (itemize) |          |
| a Depreciation \$                                                            |          | a Depreciation \$                                                                   | 18,001.  |
| b Contributions carryover \$                                                 |          | b Contributions carryover \$                                                        |          |
| c Travel and entertainment \$                                                |          | <b>STMT 17</b>                                                                      | 57,891.  |
| <b>STMT 16</b>                                                               | 78,411.  |                                                                                     | 75,892.  |
|                                                                              | 78,411.  |                                                                                     | 75,892.  |
| 6 Total of lines 1 through 5                                                 | 33,707.  | 9 Total of lines 7 and 8                                                            | -42,185. |
|                                                                              |          | 10 Income (line 28, page 1) - line 6 less line 9                                    |          |

**Schedule M-2** Analysis of Unappropriated Retained Earnings Per Books (line 24, Schedule L)

(You are not required to complete this schedule if the total assets on line 14, column (d), of Schedule L are less than \$25,000.)

|                                |           |                                               |           |
|--------------------------------|-----------|-----------------------------------------------|-----------|
| 1 Balance at beginning of year | -102,157. | 5 Distributions: a Cash                       |           |
| 2 Net income per books         | -58,357.  | b Stock                                       |           |
| 3 Other increases (itemize)    |           | c Property                                    |           |
|                                |           | 6 Other decreases (itemize)                   |           |
|                                |           |                                               |           |
| 4 Total of lines 1, 2, and 3   | -160,514. | 7 Total of lines 5 and 6                      |           |
|                                |           | 8 Balance at end of year (line 4 less line 7) | -160,514. |

Form **4626****Alternative Minimum Tax - Corporations**

(including environmental tax)

OMB No. 1545-0175

Department of the Treasury  
Internal Revenue Service▶ See separate instructions.  
▶ Attach to your tax return.**1988**

Name as shown on tax return

Employer identification number

MERCURY AEROSPACE, INC.

95-4114492

|    |                                                                                                                                                                                                                                                                                                                         |    |         |
|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---------|
| 1  | Taxable income or (loss) before net operating loss deduction                                                                                                                                                                                                                                                            | 1  | -42,185 |
| 2  | Adjustments:                                                                                                                                                                                                                                                                                                            |    |         |
| a  | Depreciation of tangible property placed in service after 1986                                                                                                                                                                                                                                                          | 2a | 92,164  |
| b  | Amortization of certified pollution control facilities placed in service after 1986                                                                                                                                                                                                                                     | 2b |         |
| c  | Amortization of mining exploration and development costs paid or incurred after 1986                                                                                                                                                                                                                                    | 2c |         |
| d  | Amortization of circulation expenditures paid or incurred after 1986 (personal holding companies only)                                                                                                                                                                                                                  | 2d |         |
| e  | Basis adjustments in determining gain or loss from sale or exchange of property                                                                                                                                                                                                                                         | 2e |         |
| f  | Long term contracts entered into after 2/28/86                                                                                                                                                                                                                                                                          | 2f |         |
| g  | Installment sales of certain property                                                                                                                                                                                                                                                                                   | 2g |         |
| h  | Merchant marine capital construction funds                                                                                                                                                                                                                                                                              | 2h |         |
| i  | Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)                                                                                                                                                                                                                                 | 2i |         |
| j  | Tax shelter farm activity loss (personal service corporations only)                                                                                                                                                                                                                                                     | 2j |         |
| k  | Passive activity loss (closely held corporations and personal service corporations only)                                                                                                                                                                                                                                | 2k |         |
| l  | Income with respect to the possessions tax credit and the alcohol fuel credit                                                                                                                                                                                                                                           | 2l |         |
| m  | Certain loss limitations                                                                                                                                                                                                                                                                                                | 2m |         |
| n  | Beneficiaries of estates and trusts                                                                                                                                                                                                                                                                                     | 2n |         |
| o  | Combine lines 2a through 2n                                                                                                                                                                                                                                                                                             | 2o | 92,164  |
| 3  | Tax preference items:                                                                                                                                                                                                                                                                                                   |    |         |
| a  | Depletion                                                                                                                                                                                                                                                                                                               | 3a |         |
| b  | Tax-exempt interest from private activity bonds issued after August 7, 1986                                                                                                                                                                                                                                             | 3b |         |
| c  | Appreciated property charitable deduction                                                                                                                                                                                                                                                                               | 3c |         |
| d  | Add lines 3a through 3c                                                                                                                                                                                                                                                                                                 | 3d |         |
| e  | Intangible drilling costs                                                                                                                                                                                                                                                                                               | 3e |         |
| f  | Reserves for losses on bad debts of financial institutions                                                                                                                                                                                                                                                              | 3f |         |
| g  | Accelerated depreciation of real property placed in service before 1987                                                                                                                                                                                                                                                 | 3g |         |
| h  | Accelerated depreciation of leased personal property placed in service before 1987 (personal holding companies only)                                                                                                                                                                                                    | 3h |         |
| i  | Amortization of certified pollution control facilities placed in service before 1987                                                                                                                                                                                                                                    | 3i |         |
| j  | Add lines 3e through 3i                                                                                                                                                                                                                                                                                                 | 3j |         |
| 4  | Combine lines 1, 2o, 3d, and 3j                                                                                                                                                                                                                                                                                         | 4  | 49,979  |
| 5  | Excess book income adjustment:                                                                                                                                                                                                                                                                                          |    |         |
| a  | Enter your adjusted net book income SEE STATEMENT 12                                                                                                                                                                                                                                                                    | 5a | -58,357 |
| b  | Subtract line 4 from line 5a (even if one or both of these figures is a negative number). (Enter zero if the result is zero or less)                                                                                                                                                                                    | 5b | 0       |
| c  | Multiply line 5b by 50%                                                                                                                                                                                                                                                                                                 | 5c |         |
| 6  | Combine lines 4 and 5c. If zero or less, stop here (you are not subject to the alternative minimum tax)                                                                                                                                                                                                                 | 6  | 49,979  |
| 7  | Alternative tax net operating loss deduction. (Do not enter more than 90% of line 6) SEE STMT 13                                                                                                                                                                                                                        | 7  | 44,981  |
| 8  | Alternative minimum taxable income (subtract line 7 from line 6)                                                                                                                                                                                                                                                        | 8  | 4,998   |
| 9  | Exemption phase-out computation:                                                                                                                                                                                                                                                                                        |    |         |
| a  | Tentative exemption amount. Enter \$40,000 (members of a controlled group, see instructions)                                                                                                                                                                                                                            | 9a | 40,000  |
| b  | Enter \$150,000 (members of a controlled group, see instructions)                                                                                                                                                                                                                                                       | 9b | 150,000 |
| c  | Subtract line 9b from line 9a. If zero or less, enter zero                                                                                                                                                                                                                                                              | 9c | 0       |
| d  | Multiply line 9c by 25%                                                                                                                                                                                                                                                                                                 | 9d | 0       |
| e  | Exemption. Subtract line 9d from line 9a. If zero or less, enter zero                                                                                                                                                                                                                                                   | 9e | 40,000  |
| 10 | Subtract line 9e from line 8. If zero or less, enter zero                                                                                                                                                                                                                                                               | 10 | 0       |
| 11 | Multiply line 10 by 20%                                                                                                                                                                                                                                                                                                 | 11 | 0       |
| 12 | Alternative minimum tax foreign tax credit                                                                                                                                                                                                                                                                              | 12 | 0       |
| 13 | Tentative minimum tax (subtract line 12 from line 11)                                                                                                                                                                                                                                                                   | 13 | 0       |
| 14 | General business credit allowed against alternative minimum tax                                                                                                                                                                                                                                                         | 14 | 0       |
| 15 | Regular tax liability before all credits except the foreign tax credit and possessions tax credit                                                                                                                                                                                                                       | 15 | 0       |
| 16 | Alternative minimum tax (subtract the sum of lines 14 and 15 from line 13). Enter on line 9a, Schedule J, Form 1120, or on the comparable line of other income tax returns                                                                                                                                              | 16 | 0       |
| 17 | Environmental tax (subtract \$2,000,000 from line 6 (computed without regard to your environmental tax deduction), and multiply the result, if any, by 0.12% (.0012)). Enter on line 9b, Schedule J, Form 1120, or on the comparable line of other income tax returns (members of a controlled group, see instructions) | 17 |         |

Form **4562****Depreciation and Amortization**

OMB No. 1545-0172

**1988**Attachment  
Sequence No. 67Department of the Treasury  
Internal Revenue Service

- ▶ See separate instructions.  
▶ Attach this form to your return.

Name(s) as shown on return

Identifying number

MERCURY AEROSPACE, INC.

95-4114492

Business or activity to which this form relates

**Part I Depreciation** (Use Part III for automobiles, certain other vehicles, computers, and property used for entertainment, recreation, or amusement.)**Section A. - Election To Expense Depreciable Assets (Section 179)**

| (a) Description of property                                                                                                             | (b) Date placed in service | (c) Cost | (d) Expense deduction |
|-----------------------------------------------------------------------------------------------------------------------------------------|----------------------------|----------|-----------------------|
| 1                                                                                                                                       |                            |          |                       |
| 2 Listed property - Enter total from Part III, Section A, column (h)                                                                    |                            |          |                       |
| 3 Total (add lines 1 and 2, but do not enter more than \$10,000)                                                                        |                            |          |                       |
| 4 Enter the amount, if any, by which the cost of all section 179 property placed in service during this tax year is more than \$200,000 |                            |          |                       |
| 5 Subtract line 4 from line 3. If less than zero, enter zero. (See instructions for other limitations)                                  |                            |          |                       |

**Section B. - Depreciation**

| (a) Class of property                                                                                                    | (b) Date placed in service | (c) Basis for depreciation (Business use only-see instructions) | (d) Recovery period | (e) Method of figuring depreciation | (f) Deduction |
|--------------------------------------------------------------------------------------------------------------------------|----------------------------|-----------------------------------------------------------------|---------------------|-------------------------------------|---------------|
| 6 Modified Accelerated Cost Recovery System (MACRS): For assets placed in service ONLY during tax year beginning in 1988 |                            |                                                                 |                     |                                     |               |
| a 3-year property                                                                                                        |                            |                                                                 |                     |                                     |               |
| b 5-year property<br>SEE STMT 7                                                                                          |                            | 70,096                                                          |                     |                                     | 14,019.       |
| c 7-year property<br>SEE STMT 7, 3                                                                                       |                            | 409,396                                                         |                     |                                     | 58,502.       |
| d 10-year property                                                                                                       |                            |                                                                 |                     |                                     |               |
| e 15-year property                                                                                                       |                            |                                                                 |                     |                                     |               |
| f 20-year property                                                                                                       |                            |                                                                 |                     |                                     |               |
| g Residential rental property                                                                                            |                            |                                                                 |                     |                                     |               |
| h Nonresidential real property<br>SEE STMT 7, 3                                                                          |                            | 11,949                                                          |                     |                                     | 174.          |
| 7 Alternative Depreciation System (ADS)                                                                                  |                            |                                                                 |                     |                                     |               |
| 8 Listed property - Enter total from Part III, Section A, column (g)                                                     |                            |                                                                 |                     |                                     | 4,100.        |
| 9 MACRS deduction for assets placed in service prior to 1988 SEE STMT 7, 3                                               |                            |                                                                 |                     |                                     | 116,474.      |

**Section C. - ACRS and/or Other Depreciation**

|                                                   |  |
|---------------------------------------------------|--|
| 10 Property subject to section 168(f)(1) election |  |
| 11 ACRS and/or other depreciation                 |  |

**Section D. - Summary**

|                                                                                                                                                                                           |          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 12 Total (add deductions on lines 5 through 11). Enter here and on the Depreciation line of your return (Partnerships and S corporations - Do NOT include any amounts entered on line 5.) | 193,269. |
| 13 For assets above placed in service during the current year, enter the portion of the basis attributable to section 263A costs.                                                         |          |

**Part II Amortization**

| (a) Description of property                                                          | (b) Date acquired | (c) Cost or other basis | (d) Code section | (e) Amortization period or percentage | (f) Amortization for this year |
|--------------------------------------------------------------------------------------|-------------------|-------------------------|------------------|---------------------------------------|--------------------------------|
| 1 Amortization for property placed in service only during tax year beginning in 1988 |                   |                         |                  |                                       |                                |
| 2 Amortization for property placed in service prior to 1988                          |                   |                         |                  |                                       |                                |
| 3 Total. Enter here and on Other Deductions or Other Expenses line of your return    |                   |                         |                  |                                       |                                |

See Paperwork Reduction Act Notice on page 1 of the separate instructions.

H788

Form 4562 (1988)

95-4114492

Form 4562 (1988)

Page 2

**Part III** Automobiles, Certain Other Vehicles, Computers, and Property Used for Entertainment, Recreation, or Amusement (Listed Property).

If you are using the standard mileage rate or deducting vehicle lease expense, complete columns (a) through (d) of Section A, all of Section B, and Section C if applicable.

**Section A. - Depreciation** (If automobiles and other listed property placed in service after June 18, 1984, are used 50% or less in a trade or business, the Section 179 deduction is not allowed and depreciation must be taken using the straight line method over 5 years. For other limitations, see instructions.)

| Do you have evidence to support the business use claimed?           |                            | If "Yes", is the evidence written?                                  |                                                                   |                                                                    |                                             |                            |                         |  |  |
|---------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------------|---------------------------------------------|----------------------------|-------------------------|--|--|
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                            | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                                                                   |                                                                    |                                             |                            |                         |  |  |
| (a) Type of property<br>(List vehicles first)                       | (b) Date placed in service | (c) Business use percent -age (%)                                   | (d) Cost or other basis<br>(see instructions for leased property) | (e) Basis for depreciation<br>(Business use only-see instructions) | (f) Depreciation method and recovery period | (g) Depreciation deduction | (h) Section 179 expense |  |  |
| SEE STMT                                                            | 7                          |                                                                     |                                                                   | 13,373                                                             |                                             | 4,100                      |                         |  |  |
| Total (Enter here and on line 2, page 1.)                           |                            |                                                                     |                                                                   |                                                                    |                                             |                            |                         |  |  |
| Total (Enter here and on line 8, page 1.)                           |                            |                                                                     |                                                                   |                                                                    |                                             |                            | 4,100                   |  |  |

**Section B. - Information Regarding Use of Vehicles**

Complete this section as follows, if you deduct expenses for vehicles:

- Always complete this section for vehicles used by a sole proprietor, partner, or other more than 5% owner or related person.
- If you provided vehicles to employees, first answer the questions in Section C to see if you meet an exception to completing this section for those items.

|                                                                                       | Vehicle 1 |    | Vehicle 2 |    | Vehicle 3 |    | Vehicle 4 |    | Vehicle 5 |    | Vehicle 6 |    |
|---------------------------------------------------------------------------------------|-----------|----|-----------|----|-----------|----|-----------|----|-----------|----|-----------|----|
| 1 Total miles driven during the year . . . . .                                        | 24,000    |    | 30,000    |    | 18,000    |    |           |    |           |    |           |    |
| 2 Total business miles driven during the year . . . . .                               | 24,000    |    | 21,600    |    | 6,000     |    |           |    |           |    |           |    |
| 3 Total commuting miles driven during the year . . . . .                              |           |    | 8,400     |    | 12,000    |    |           |    |           |    |           |    |
| 4 Total other personal (noncommuting) miles driven . . . . .                          |           |    |           |    |           |    |           |    |           |    |           |    |
|                                                                                       | Yes       | No | Yes       | No | Yes       | No | Yes       | No | Yes       | No | Yes       | No |
| 5 Was the vehicle available for personal use during off-duty hours? . . . . .         |           | X  |           | X  | X         |    |           |    |           |    |           |    |
| 6 Was the vehicle used primarily by a more than 5% owner or related person? . . . . . |           | X  |           | X  |           | X  |           |    |           |    |           |    |
| 7 Is another vehicle available for personal use? . . . . .                            | X         |    | X         |    | X         |    |           |    |           |    |           |    |

**Section C. - Questions for Employers Who Provide Vehicles for Use by Employees.**

(Answer these questions to determine if you meet an exception to completing Section B. Note: Section B must always be completed for vehicles used by sole proprietors, partners, or other more than 5% owners or related persons.)

|                                                                                                                                                                                                                                   | Yes | No |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 8 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? . . . . .                                                                                       |     | X  |
| 9 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? (See instructions for vehicles used by corporate officers, directors, or 1% or more owners.) . . . . . | X   |    |
| 10 Do you treat all use of vehicles by employees as personal use? . . . . .                                                                                                                                                       |     | X  |
| 11 Do you provide more than five vehicles to your employees and retain the information received from your employees concerning the use of the vehicles? . . . . .                                                                 |     | X  |
| 12 Do you meet the requirements concerning qualified automobile demonstration use (see instructions)? . . . . .                                                                                                                   |     | X  |

Note: If your answer to 8, 9, 10, 11, or 12 is "Yes," you need not complete Section B for the covered vehicles.

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FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/88

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STATEMENT 1 - CORPORATION OWNERSHIP INFORMATION

CORPORATION IS OWNED BY

(A) NAME BLANC-AERO INDUSTRIES  
ADDRESS  
(B) PERCENTAGE OWNED 100 PCT  
(C) COUNTRY-IF NOT U.S. FRANCE

---

STATEMENT 2 - COST OF GOODS SOLD

OTHER COSTS

|                       |         |
|-----------------------|---------|
| INSURANCE             | 195,455 |
| SUPPLIES              | 287,980 |
| RENT                  | 142,758 |
| PAYROLL TAXES         | 108,292 |
| UTILITIES             | 54,409  |
| REPAIRS & MAINTENANCE | 52,992  |
| DEPRECIATION          | 167,601 |

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TOTAL OTHER COSTS

1,009,487

=====

FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/88

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STATEMENT 3 - DEPRECIATION COST OF GOODS SOLD/OPERATIONS

| DATE<br>ACQUIRED<br>----- | COST OR<br>BASIS<br>----- | PRIOR YEARS<br>DEPRECIATION<br>----- | METHOD | YRS | PCT | CURRENT<br>DEPRECIATION<br>----- |
|---------------------------|---------------------------|--------------------------------------|--------|-----|-----|----------------------------------|
| 5-YEAR MACRS PROPERTY     |                           |                                      |        |     |     |                                  |
| GMC TRUCK                 |                           |                                      |        |     |     |                                  |
| 07 87                     | 8,814                     | 734                                  | 200DB  | 5   |     | 2,820                            |
|                           | (ALT MIN ADJUSTMENT       |                                      |        |     |     | 1,374)                           |
| CLARK FORKLIFT            |                           |                                      |        |     |     |                                  |
| 07 87                     | 9,000                     | 750                                  | 200DB  | 5   |     | 2,880                            |
|                           | (ALT MIN ADJUSTMENT       |                                      |        |     |     | 1,403)                           |
| 7-YEAR MACRS PROPERTY     |                           |                                      |        |     |     |                                  |
| BLASTING MACHINERY        |                           |                                      |        |     |     |                                  |
| 07 87                     | 10,118                    | 602                                  | 200DB  | 7   |     | 2,478                            |
|                           | (ALT MIN ADJUSTMENT       |                                      |        |     |     | 1,285)                           |
| COLD HEAD MACHINERY       |                           |                                      |        |     |     |                                  |
| 07 87                     | 42,954                    | 2,557                                | 200DB  | 7   |     | 10,519                           |
|                           | (ALT MIN ADJUSTMENT       |                                      |        |     |     | 5,455)                           |
| HOT HEAD MACHINERY        |                           |                                      |        |     |     |                                  |
| 07 87                     | 39,894                    | 2,375                                | 200DB  | 7   |     | 9,770                            |
|                           | (ALT MIN ADJUSTMENT       |                                      |        |     |     | 5,066)                           |
| GRINDING MACHINERY        |                           |                                      |        |     |     |                                  |
| 07 87                     | 62,571                    | 3,725                                | 200DB  | 7   |     | 15,324                           |
|                           | (ALT MIN ADJUSTMENT       |                                      |        |     |     | 7,947)                           |
| TRAUD MACHINERY           |                           |                                      |        |     |     |                                  |
| 07 87                     | 58,346                    | 3,474                                | 200DB  | 7   |     | 14,289                           |
|                           | (ALT MIN ADJUSTMENT       |                                      |        |     |     | 7,410)                           |
| MARKING MACHINERY         |                           |                                      |        |     |     |                                  |
| 07 87                     | 1,811                     | 108                                  | 200DB  | 7   |     | 444                              |
|                           | (ALT MIN ADJUSTMENT       |                                      |        |     |     | 230)                             |
| POINTING MACHINERY        |                           |                                      |        |     |     |                                  |
| 07 87                     | 14,444                    | 860                                  | 200DB  | 7   |     | 3,537                            |
|                           | (ALT MIN ADJUSTMENT       |                                      |        |     |     | 1,834)                           |
| TREAD ROLL MACHINERY      |                           |                                      |        |     |     |                                  |
| 07 87                     | 40,138                    | 2,390                                | 200DB  | 7   |     | 9,830                            |
|                           | (ALT MIN ADJUSTMENT       |                                      |        |     |     | 5,098)                           |
| FILLET ROLL MACHINERY     |                           |                                      |        |     |     |                                  |
| 07 87                     | 16,117                    | 960                                  | 200DB  | 7   |     | 3,947                            |
|                           | (ALT MIN ADJUSTMENT       |                                      |        |     |     | 2,047)                           |
| LATHE MACHINERY           |                           |                                      |        |     |     |                                  |
| 07 87                     | 21,552                    | 1,283                                | 200DB  | 7   |     | 5,278                            |
|                           | (ALT MIN ADJUSTMENT       |                                      |        |     |     | 2,737)                           |
| WASH MACHINERY            |                           |                                      |        |     |     |                                  |
| 07 87                     | 5,747                     | 342                                  | 200DB  | 7   |     | 1,407                            |
|                           | (ALT MIN ADJUSTMENT       |                                      |        |     |     | 729)                             |
| TRIM MACHINERY            |                           |                                      |        |     |     |                                  |
| 07 87                     | 22,053                    | 1,313                                | 200DB  | 7   |     | 5,401                            |
|                           | (ALT MIN ADJUSTMENT       |                                      |        |     |     | 2,801)                           |

FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/88

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STATEMENT 3 - DEPRECIATION COST OF GOODS SOLD/OPERATIONS (CONTINUED)

| DATE<br>ACQUIRED<br>----- | COST OR<br>BASIS<br>----- | DEPRECIATION<br>----- | PRIOR YEARS<br>DEPRECIATION<br>----- | METHOD<br>----- | YRS<br>--- | PCT<br>--- | CURRENT<br>DEPRECIATION<br>----- |
|---------------------------|---------------------------|-----------------------|--------------------------------------|-----------------|------------|------------|----------------------------------|
| SHIPPING MACHINERY        |                           |                       |                                      |                 |            |            |                                  |
| 07 87                     | 722                       | 43                    | 200DB                                | 7               |            |            | 177                              |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 92)        |            |                                  |
| LAB MACHINERY             |                           |                       |                                      |                 |            |            |                                  |
| 07 87                     | 21,409                    | 1,275                 | 200DB                                | 7               |            |            | 5,243                            |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 2,719)     |            |                                  |
| INSPECTION MACHINERY      |                           |                       |                                      |                 |            |            |                                  |
| 07 87                     | 14,757                    | 879                   | 200DB                                | 7               |            |            | 3,614                            |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 1,874)     |            |                                  |
| MAINTENANCE MACHINERY     |                           |                       |                                      |                 |            |            |                                  |
| 07 87                     | 11,980                    | 713                   | 200DB                                | 7               |            |            | 2,934                            |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 1,522)     |            |                                  |
| TOOLING MACHINERY         |                           |                       |                                      |                 |            |            |                                  |
| 07 87                     | 11,052                    | 658                   | 200DB                                | 7               |            |            | 2,707                            |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 1,404)     |            |                                  |
| GENERAL PLANT MACHINERY   |                           |                       |                                      |                 |            |            |                                  |
| 07 87                     | 24,166                    | 1,439                 | 200DB                                | 7               |            |            | 5,918                            |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 3,069)     |            |                                  |
| BLASTING MACHINERY        |                           |                       |                                      |                 |            |            |                                  |
| 07/01/88                  | 783                       |                       | 200DB1/2                             | 7               | 14.29      |            | 112                              |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 53)        |            |                                  |
| DRILLING MACHINERY        |                           |                       |                                      |                 |            |            |                                  |
| 07/01/88                  | 17,430                    |                       | 200DB1/2                             | 7               | 14.29      |            | 2,491                            |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 1,184)     |            |                                  |
| HOT HEAD MACHINERY        |                           |                       |                                      |                 |            |            |                                  |
| 07/01/88                  | 35,773                    |                       | 200DB1/2                             | 7               | 14.29      |            | 5,112                            |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 2,429)     |            |                                  |
| GRINDING MACHINERY        |                           |                       |                                      |                 |            |            |                                  |
| 07/01/88                  | 76,707                    |                       | 200DB1/2                             | 7               | 14.29      |            | 10,961                           |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 5,208)     |            |                                  |
| TRAUB MACHINERY           |                           |                       |                                      |                 |            |            |                                  |
| 07/01/88                  | 3,314                     |                       | 200DB1/2                             | 7               | 14.29      |            | 474                              |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 225)       |            |                                  |
| MARKETING MACHINERY       |                           |                       |                                      |                 |            |            |                                  |
| 07/01/88                  | 5,742                     |                       | 200DB1/2                             | 7               | 14.29      |            | 821                              |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 390)       |            |                                  |
| POINTING MACHINERY        |                           |                       |                                      |                 |            |            |                                  |
| 07/01/88                  | 7,774                     |                       | 200DB1/2                             | 7               | 14.29      |            | 1,111                            |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 528)       |            |                                  |
| THREADROLL MACHINERY      |                           |                       |                                      |                 |            |            |                                  |
| 07/01/88                  | 38,189                    |                       | 200DB1/2                             | 7               | 14.29      |            | 5,457                            |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 2,593)     |            |                                  |
| LATHE MACHINERY           |                           |                       |                                      |                 |            |            |                                  |
| 07/01/88                  | 96,810                    |                       | 200DB1/2                             | 7               | 14.29      |            | 13,834                           |
|                           | (ALT MIN ADJUSTMENT       |                       |                                      |                 | 6,573)     |            |                                  |

FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/88

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STATEMENT 3 - DEPRECIATION COST OF GOODS SOLD/OPERATIONS (CONTINUED)

| DATE<br>ACQUIRED              | DEPRECIATION CALCULATION |                             |          |        |       | CURRENT<br>DEPRECIATION |
|-------------------------------|--------------------------|-----------------------------|----------|--------|-------|-------------------------|
|                               | COST OR<br>BASIS         | PRIOR YEARS<br>DEPRECIATION | METHOD   | YRS    | PCT   |                         |
| WASHING MACHINERY             |                          |                             |          |        |       |                         |
| 07/01/88                      | 479                      |                             | 200DB1/2 | 7      | 14.29 | 68                      |
|                               | (ALT MIN ADJUSTMENT      |                             |          | 32)    |       |                         |
| TRIMMING MACHINERY            |                          |                             |          |        |       |                         |
| 07/01/88                      | 10,785                   |                             | 200DB1/2 | 7      | 14.29 | 1,541                   |
|                               | (ALT MIN ADJUSTMENT      |                             |          | 732)   |       |                         |
| SHIPPING MACHINERY            |                          |                             |          |        |       |                         |
| 07/01/88                      | 5,857                    |                             | 200DB1/2 | 7      | 14.29 | 837                     |
|                               | (ALT MIN ADJUSTMENT      |                             |          | 398)   |       |                         |
| INSPECTION MACHINERY          |                          |                             |          |        |       |                         |
| 07/01/88                      | 1,524                    |                             | 200DB1/2 | 7      | 14.29 | 218                     |
|                               | (ALT MIN ADJUSTMENT      |                             |          | 104)   |       |                         |
| MAINTENANCE MACHINERY         |                          |                             |          |        |       |                         |
| 07/01/88                      | 1,716                    |                             | 200DB1/2 | 7      | 14.29 | 245                     |
|                               | (ALT MIN ADJUSTMENT      |                             |          | 116)   |       |                         |
| TOOLING MACHINERY             |                          |                             |          |        |       |                         |
| 07/01/88                      | 99,426                   |                             | 200DB1/2 | 7      | 14.29 | 14,208                  |
|                               | (ALT MIN ADJUSTMENT      |                             |          | 6,751) |       |                         |
| GENERAL PLANT & MACHINERY     |                          |                             |          |        |       |                         |
| 07/01/88                      | 4,433                    |                             | 200DB1/2 | 7      | 14.29 | 633                     |
|                               | (ALT MIN ADJUSTMENT      |                             |          | 301)   |       |                         |
| NONRESIDENTIAL REAL PROPERTY  |                          |                             |          |        |       |                         |
| LEASEHOLD IMPROVEMENTS        |                          |                             |          |        |       |                         |
| 07 87                         | 27,882                   | 406                         | SL       | 31.5   |       | 885                     |
|                               | (ALT MIN ADJUSTMENT      |                             |          | 188)   |       |                         |
| LEASEHOLD IMPROVEMENTS        |                          |                             |          |        |       |                         |
| 07/01/88                      | 5,200                    |                             | SL 1/12  | 31.5   | 1.45  | 76                      |
|                               | (ALT MIN ADJUSTMENT      |                             |          | 16)    |       |                         |
| TOTAL ALT MIN TAX ADJUSTMENTS |                          |                             |          |        |       | 83,917                  |
| TOT 5YR MACRS                 | 17,814                   | 1,484                       |          |        |       | 5,700                   |
| TOT 7YR MACRS                 | 826,573                  | 24,996                      |          |        |       | 160,940                 |
| TOT NONRES RL                 | 33,082                   | 406                         |          |        |       | 961                     |
| TOTALS                        | 877,469                  | 26,886                      |          |        |       | 167,601                 |
|                               | =====                    | =====                       |          |        |       | =====                   |

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STATEMENT 4 - OTHER INCOME

|                                                   |        |
|---------------------------------------------------|--------|
| INCOME FROM SCRAP SALES                           | 1,099  |
| MISC INCOME                                       | 9,980  |
| VACATION                                          | 13,653 |
| RECOVERY OF NOTES PURCHASED<br>IN EXCESS OF BASIS | 9,868  |

TOTAL OTHER INCOME 34,600

STATEMENT 5 - TAXES

|                     |        |
|---------------------|--------|
| STATE INCOME TAXES  | 600    |
| PAYROLL TAXES       | 21,841 |
| PROPERTY TAXES      | 3,914  |
| MISCELLANEOUS TAXES | 9,918  |

TOTAL TAXES 36,273

STATEMENT 6 - OTHER DEDUCTIONS

|                              |        |
|------------------------------|--------|
| PROFESSIONAL FEES            | 50,615 |
| INTERCOMPANY EXPENSES        | 28,881 |
| LICENSE & PERMITS            | 14,930 |
| AUTO EXPENSE                 | 3,758  |
| DUES & SUBSCRIPTIONS         | 1,579  |
| POSTAGE                      | 2,226  |
| OFFICE EXPENSE               | 49,120 |
| TELEPHONE & TELEX            | 33,462 |
| INSURANCE                    | 40,627 |
| UTILITIES                    | 17,732 |
| COMMISSIONS                  | 14,082 |
| TRAVEL                       | 7,386  |
| ENTERTAINMENT - 80%          | 1,604  |
| SEC. 263 A DEPRECIATION ADJ. | -572   |

TOTAL OTHER DEDUCTIONS 265,430

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STATEMENT 7 - DEPRECIATION

| DATE<br>ACQUIRED<br>-----     | COST OR<br>BASIS<br>----- | PRIOR YEARS<br>DEPRECIATION<br>----- | METHOD   | YRS  | PCT    | CURRENT<br>DEPRECIATION<br>----- |
|-------------------------------|---------------------------|--------------------------------------|----------|------|--------|----------------------------------|
| 5-YEAR MACRS PROPERTY         |                           |                                      |          |      |        |                                  |
| OFFICE EQUIPMENT              |                           |                                      |          |      |        |                                  |
| 07/23/87                      | 11,259                    | 938                                  | 200DB    | 5    |        | 3,603                            |
|                               | (ALT MIN ADJUSTMENT       |                                      |          |      | 1,140) |                                  |
| OFFICE EQUIPMENT              |                           |                                      |          |      |        |                                  |
| 07/01/88                      | 58,546                    |                                      | 200DB1/2 | 5    | 20.00  | 11,709                           |
|                               | (ALT MIN ADJUSTMENT       |                                      |          |      | 4,391) |                                  |
| FORD TEMPO                    |                           |                                      |          |      |        |                                  |
| 07/01/88                      | 11,550                    |                                      | 200DB1/2 | 5    | 20.00  | 2,310                            |
|                               | (ALT MIN ADJUSTMENT       |                                      |          |      | 577)   |                                  |
| LUXURY AUTO MACRS             |                           |                                      |          |      |        |                                  |
| 1987 CHEVROLET                |                           |                                      |          |      |        |                                  |
| # 07/23/87                    | 13,373                    | 1,067                                | 200DB    | 5    |        | 4,100                            |
|                               | (ALT MIN ADJUSTMENT       |                                      |          |      | 690)   |                                  |
| 7-YEAR MACRS PROPERTY         |                           |                                      |          |      |        |                                  |
| OFFICE FURNITURE              |                           |                                      |          |      |        |                                  |
| 07/23/87                      | 9,431                     | 562                                  | 200DB    | 7    |        | 2,310                            |
|                               | (ALT MIN ADJUSTMENT       |                                      |          |      | 1,001) |                                  |
| OFFICE FURNITURE              |                           |                                      |          |      |        |                                  |
| 07/01/88                      | 2,654                     |                                      | 200DB1/2 | 7    | 14.29  | 379                              |
|                               | (ALT MIN ADJUSTMENT       |                                      |          |      | 180)   |                                  |
| NONRESIDENTIAL REAL PROPERTY  |                           |                                      |          |      |        |                                  |
| LEASEHOLD IMPROVEMENTS        |                           |                                      |          |      |        |                                  |
| 07/23/87                      | 36,495                    | 531                                  | SL       | 31.5 |        | 1,159                            |
|                               | (ALT MIN ADJUSTMENT       |                                      |          |      | 247)   |                                  |
| LEASEHOLD IMPROVEMENTS        |                           |                                      |          |      |        |                                  |
| 07/01/88                      | 6,749                     |                                      | SL 1/12  | 31.5 | 1.45   | 98                               |
|                               | (ALT MIN ADJUSTMENT       |                                      |          |      | 21)    |                                  |
| -----                         |                           |                                      |          |      |        | -----                            |
| TOTAL ALT MIN TAX ADJUSTMENTS |                           |                                      |          |      |        | 8,247                            |
| TOT 5YR MACRS                 | 81,355                    | 938                                  |          |      |        | 17,622                           |
| TOT AUTO MACRS                | 13,373                    | 1,067                                |          |      |        | 4,100                            |
| TOT 7YR MACRS                 | 12,085                    | 562                                  |          |      |        | 2,689                            |
| TOT NONRES RL                 | 43,244                    | 531                                  |          |      |        | 1,257                            |
| -----                         |                           |                                      |          |      |        | -----                            |
| TOTALS                        | 150,057                   | 3,098                                |          |      |        | 25,668                           |
| =====                         |                           |                                      |          |      |        | =====                            |
| # - LISTED PROPERTY           |                           |                                      |          |      |        |                                  |

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STATEMENT 8 - NET OPERATING LOSS DEDUCTION

| YEAR                     | LOSS SUSTAINED | AMOUNT APPLIED<br>IN PRIOR YEARS | AMOUNT AVAILABLE<br>FOR CARRYOVER |
|--------------------------|----------------|----------------------------------|-----------------------------------|
| 1987                     | 48,304         |                                  | 48,304                            |
|                          |                |                                  | -----                             |
| TOTAL NET OPERATING LOSS |                |                                  | 48,304                            |
|                          |                |                                  | =====                             |

STATEMENT 9 - OTHER CURRENT ASSETS

|                            | BEGINNING OF<br>TAXABLE YEAR | END OF<br>TAXABLE YEAR |
|----------------------------|------------------------------|------------------------|
| DEPOSITS                   | 15,000                       | 20,613                 |
| PREPAID EXPENSES           | 0                            | 11,501                 |
|                            | -----                        | -----                  |
| TOTAL OTHER CURRENT ASSETS | 15,000                       | 32,114                 |
|                            | =====                        | =====                  |

STATEMENT 10 - OTHER CURRENT LIABILITIES

|                                 | BEGINNING OF<br>TAXABLE YEAR | END OF<br>TAXABLE YEAR |
|---------------------------------|------------------------------|------------------------|
| PAYROLL TAXES PAYABLE           | 549                          | 237                    |
| ACCRUED PAYROLL                 | 39,546                       | 74,561                 |
| OTHER ACCRUED EXPENSES          | 14,127                       | 0                      |
|                                 | -----                        | -----                  |
| TOTAL OTHER CURRENT LIABILITIES | 54,222                       | 74,798                 |
|                                 | =====                        | =====                  |

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STATEMENT 11 - OTHER LIABILITIES

|                         | BEGINNING OF<br>TAXABLE YEAR | END OF<br>TAXABLE YEAR |
|-------------------------|------------------------------|------------------------|
| INTERCOMPANY LOAN       | 483,500                      | 1,311,719              |
|                         | -----                        | -----                  |
| TOTAL OTHER LIABILITIES | 483,500                      | 1,311,719              |
|                         | =====                        | =====                  |

STATEMENT 12 - COMPUTATION OF ADJUSTED NET BOOK INCOME FOR  
ALTERNATIVE MINIMUM TAX PURPOSES

|                                                  |         |
|--------------------------------------------------|---------|
| 1. NET BOOK INCOME                               | -58,357 |
| 2. INCOME TAXES                                  |         |
| (A) FEDERAL INCOME TAXES                         | 0       |
| (B) FOREIGN COUNTRY OR U.S. POSSESSIONS TAXES    | 0       |
| 3. ADJUSTMENTS FOR BOOK AND TAX YEAR DIFFERENCES | 0       |
| 4. POSSESSION CORPORATION DIVIDENDS              | 0       |
| 5. OTHER ADJUSTMENTS                             | 0       |
| 6. CONSOLIDATED ADJUSTMENTS                      | 0       |
|                                                  | -----   |
| 7. ADJUSTED NET BOOK INCOME (ADD LINES 1 THRU 5) | -58,357 |
|                                                  | =====   |

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STATEMENT 13 - ALTERNATIVE TAX NET OPERATING LOSS DEDUCTION

| YEAR | LOSS SUSTAINED | AMOUNT APPLIED<br>IN PRIOR YEARS | AMOUNT AVAILABLE<br>FOR CARRYOVER |
|------|----------------|----------------------------------|-----------------------------------|
| 1987 | 48,304         |                                  | 48,304                            |

TOTAL ALTERNATIVE TAX NET OPERATING LOSS

48,304

ALTERNATIVE TAX NOL- LIMITED TO 90% OF  
ALTERNATIVE MINIMUM TAXABLE INCOME BEFORE NOL

44,981

STATEMENT 14 - COMPUTATION OF THE ALTERNATIVE TAX NET  
OPERATING LOSS CARRYOVER

|                                                                                                                  |        |
|------------------------------------------------------------------------------------------------------------------|--------|
| 1. CURRENT YEAR NET OPERATING LOSS                                                                               | 42,185 |
| 2. ADJUSTMENT FOR DEPRECIATION                                                                                   | 92,164 |
| 3. ADJUSTMENT FOR LONG TERM CONTRACT METHOD                                                                      | 0      |
| 4. ADJUSTMENT FOR INSTALLMENT SALES METHOD                                                                       | 0      |
| 5. ADJUSTMENT FOR POLLUTION CONTROL FACILITIES                                                                   | 0      |
| 6. ADJUSTMENT FOR PERCENTAGE DEPLETION                                                                           | 0      |
| 7. ADJUSTMENT FOR INTANGIBLE DRILLING COSTS                                                                      | 0      |
| 8. BAD DEBT RESERVE OF FINANCIAL ORGANIZATIONS                                                                   | 0      |
| 9. MINING EXPLORATION AND DEVELOPMENT COSTS                                                                      | 0      |
| 10. SPECIAL DEDUCTIONS                                                                                           | 0      |
| 11. TAX EXEMPT INTEREST                                                                                          | 0      |
| 12. OTHER ADJUSTMENTS                                                                                            | 0      |
| 13. ALTERNATIVE TAX NET OPERATING LOSS CARRYOVER TO SUB-<br>SEQUENT YEARS (SUBTRACT LINES 2 THRU 12 FROM LINE 1) | 0      |

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STATEMENT 15 - TAXABLE INCOME NOT RECORDED  
ON BOOKS THIS YEAR

VACATION - BEG. RESERVE ADJ

13,653

TOTAL TAXABLE INCOME NOT ON BOOKS

13,653

STATEMENT 16 - OTHER EXPENSES RECORDED ON BOOKS  
NOT DEDUCTED IN THIS RETURN

COSTS CAPITALIZED-SEC 263A  
NON-DEDUCTIBLE ENTERTAINMENT  
ACCRUED VACATION

12,079

410

65,922

TOTAL OTHER EXPENSES ON BOOKS NOT ON RETURN

78,411

STATEMENT 17 - OTHER DEDUCTIONS IN THIS TAX RETURN  
NOT CHARGED AGAINST BOOK INCOME

COSTS CAPITALIZED-SEC 263A  
VACATION PAID

33,317

24,574

TOTAL OTHER DEDUCTIONS ON RETURN NOT ON BOOKS

57,891

Form **5472**

(Rev. December 1987)

Department of the Treasury  
Internal Revenue Service**Information Return of a Foreign Owned Corporation**

(Under Section 6038A of the Internal Revenue Code)

OMB No. 1545-0805

Expires 11-30-90

For tax year of the reporting corporation beginning JAN 1, 1988, and ending DEC 31, 1988**Part I Reporting Corporation** (All information must be written in the English language)

1a Name of reporting corporation

MERCURY AEROSPACE, INC.

b Identifying number

954114492

2 Enter how many Forms 5472 were filed for the taxable year

**Part II Related Person** (All information must be written in the English language)

1 Name and address of related person

BLANC-AERO INDUSTRIES  
15, RUE LASSON 75012 PARIS BP 10-75560  
PARIS CEDEX 12 FRANCE

2 Countries of residence

FRANCE

3 Type of relationship—Check applicable box:

Controlled by reporting corporation ☐Controls reporting corporation ☒Common control ☐Other related person ☐

4a Principal business activity

MANUFACTURING

b Business code number

3998

c Principal cities and countries where business is conducted

U.S.A**Part III Monetary Transactions Between Reporting Corporations and Related Foreign Person** (All amounts must be stated in U.S. dollars) (Reasonable estimates may be used—See Instructions)

|                                                                                                               |                     |                  |
|---------------------------------------------------------------------------------------------------------------|---------------------|------------------|
| 1 Sales of stock in trade                                                                                     | 1                   |                  |
| 2 Sales of tangible property other than stock in trade                                                        | 2                   |                  |
| 3 Rents and royalties received (for other than intangible property rights)                                    | 3                   |                  |
| 4 Sales, leases, licensings, etc., of intangible property rights (e.g., patents, trademarks, secret formulas) | 4                   |                  |
| 5 Consideration received for technical, managerial, engineering, construction, scientific, or like services   | 5                   |                  |
| 6 Commissions received                                                                                        | 6                   |                  |
| 7 Amounts borrowed                                                                                            | a Beginning Balance | b Ending Balance |
| 8 Interest received                                                                                           | 8                   |                  |
| 9 Premiums received for insurance or reinsurance                                                              | 9                   |                  |
| 10 Total (Combine amounts on lines 1 through 9)                                                               | 10                  |                  |
| 11 Purchases of stock in trade                                                                                | 11                  |                  |
| 12 Purchases of tangible property other than stock in trade                                                   | 12                  |                  |
| 13 Rents and royalties paid (for other than intangible property rights)                                       | 13                  |                  |
| 14 Purchases, leases, licensings, etc., of intangible property (e.g., patents, trademarks, secret formulas)   | 14                  |                  |
| 15 Consideration paid for technical, managerial, engineering, construction, scientific, or like services      | 15                  |                  |
| 16 Commissions paid                                                                                           | 16                  |                  |
| 17 Amounts loaned                                                                                             | a Beginning Balance | b Ending Balance |
| 18 Interest paid                                                                                              | 18                  |                  |
| 19 Premiums paid for insurance or reinsurance                                                                 | 19                  |                  |
| 20 Total (Combine amounts on lines 11 through 19)                                                             | 20                  | <u>1,311,719</u> |

**Part IV Describe All Nonmonetary and Nonconsideration Transactions Between the Reporting Corporation and the Related Foreign Person** (Attach separate sheet) (See Instructions)**Instructions**

(References are to the Internal Revenue Code unless otherwise noted.)

**Paperwork Reduction Act Notice.**—We ask for this information to carry out the U.S. Internal Revenue laws. We need it to ensure that taxpayers are complying with these laws and to allow us to figure and collect the right amount of tax. You are required to give us this information.

**Purpose of Form**

Form 5472 is an annual information return that is used for reporting the activities between certain foreign owned corporations and all related parties.

For purposes of Form 5472, a "related party" is any party related to the reporting corporation within the meaning of section 267(b) or section 707(b)(1). The term includes any other related person who is defined in section 482.

**New Use for Form 5472.**—The Tax Reform Act of 1986 revised Code section 6038A to require that a foreign controlled U.S. corporation and a foreign controlled foreign corporation engaged in a U.S. trade or business report transactions with all foreign related parties.

**Who Must File**

(1) Domestic or Foreign Corporations.—Domestic corporations or foreign

corporations that are engaged in a trade or business in the United States and that are "controlled" by a foreign person must file Form 5472 if the corporation had any reportable transactions with a related person.

However, a corporation is not required to file Form 5472 if during the tax year:

- It had no gross income (determined without reference to losses) subject to United States taxation, other than withholding tax under section 881, or
- Its sole trade or business in the United States is banking, financing, or similar business (as defined in regulations section 1.864-4(c)(5)(i)), or

268701

8339-10 025 02

CC  
Form**1120**Department of the Treasury  
Internal Revenue Service**U.S. Corporation Income Tax Return**For calendar year 1989 or other tax year beginning  
ending

OMB. No. 1545-0123

**1989**

Check if a-

**A** Consolidated return ☐**B** Personal holding co. ☐**C** Personal service corp. (as  
defined in Temp. Regs.  
sec. 1.441-4T) ☐

Name

**MERCURY AEROSPACE, INC.**

Number and street (or P. O. box number if mail is not delivered to street address)

**11800 SHERMAN WAY**

City or town, state, and ZIP code

**NO HOLLYWOOD****CA****91605****D** Employer identification number**95-4114492****E** Date incorporated**7/17/87****F** Total assets (see Specific Inst.)\$ **4,022,516.****G** Check applicable boxes: (1) ☐ Initial return (2) ☐ Final return (3) ☐ Change in address

|                                                                 |                                                                                                        |                                                                                                                                 |                      |                |                             |                 |   |     |                 |                   |
|-----------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------|-----------------------------|-----------------|---|-----|-----------------|-------------------|
| Income                                                          | 1a                                                                                                     | Gross receipts or sales                                                                                                         | <b>6,208,136.</b>    | b              | Less returns and allowances | <b>479,382.</b> | c | Bal | 1c              | <b>5,728,754.</b> |
|                                                                 | 2                                                                                                      | Cost of goods sold and/or operations (Schedule A, line 7)                                                                       |                      |                |                             |                 |   |     | 2               | <b>4,383,412.</b> |
|                                                                 | 3                                                                                                      | Gross profit (line 1c less line 2)                                                                                              |                      |                |                             |                 |   |     | 3               | <b>1,345,342.</b> |
|                                                                 | 4                                                                                                      | Dividends (Schedule C, line 19)                                                                                                 |                      |                |                             |                 |   |     | 4               |                   |
|                                                                 | 5                                                                                                      | Interest                                                                                                                        |                      |                |                             |                 |   |     | 5               | <b>2,719.</b>     |
|                                                                 | 6                                                                                                      | Gross rents                                                                                                                     |                      |                |                             |                 |   |     | 6               |                   |
|                                                                 | 7                                                                                                      | Gross royalties                                                                                                                 |                      |                |                             |                 |   |     | 7               |                   |
|                                                                 | 8                                                                                                      | Capital gain net income (attach Schedule D (Form 1120)).                                                                        |                      |                |                             |                 |   |     | 8               |                   |
|                                                                 | 9                                                                                                      | Net gain or (loss) from Form 4797, Part II, line 18 (attach Form 4797)                                                          |                      |                |                             |                 |   |     | 9               | <b>-2,869.</b>    |
|                                                                 | 10                                                                                                     | Other income (see instructions - attach schedule)                                                                               | <b>SEE STATEMENT</b> | <b>4</b>       |                             |                 |   |     | 10              | <b>1,754.</b>     |
|                                                                 | 11                                                                                                     | <b>TOTAL</b> income - Add lines 3 through 10                                                                                    |                      |                |                             |                 |   |     | 11              | <b>1,346,946.</b> |
| Deductions<br>(See instructions for limitations on deductions.) | 12                                                                                                     | Compensation of officers (Schedule E, line 4)                                                                                   |                      |                |                             |                 |   |     | 12              |                   |
|                                                                 | 13a                                                                                                    | Salaries and wages                                                                                                              | <b>433,995.</b>      | b              | Less jobs credit            |                 | c | Bal | 13c             | <b>433,995.</b>   |
|                                                                 | 14                                                                                                     | Repairs                                                                                                                         |                      |                |                             |                 |   |     | 14              |                   |
|                                                                 | 15                                                                                                     | Bad debts                                                                                                                       |                      |                |                             |                 |   |     | 15              | <b>20,551.</b>    |
|                                                                 | 16                                                                                                     | Rents                                                                                                                           |                      |                |                             |                 |   |     | 16              | <b>47,586.</b>    |
|                                                                 | 17                                                                                                     | Taxes                                                                                                                           | <b>SEE STATEMENT</b> | <b>5</b>       |                             |                 |   |     | 17              | <b>31,415.</b>    |
|                                                                 | 18                                                                                                     | Interest                                                                                                                        |                      |                |                             |                 |   |     | 18              | <b>3,056.</b>     |
|                                                                 | 19                                                                                                     | Contributions (see instructions for 10% limitation)                                                                             |                      |                |                             |                 |   |     | 19              |                   |
|                                                                 | 20                                                                                                     | Depreciation (attach Form 4562)                                                                                                 |                      | 20             | <b>286,557.</b>             |                 |   |     |                 |                   |
|                                                                 | 21                                                                                                     | Less depreciation claimed on Schedule A and elsewhere on return                                                                 |                      | 21a            | <b>254,372.</b>             |                 |   |     | 21b             | <b>32,185.</b>    |
|                                                                 | 22                                                                                                     | Depletion                                                                                                                       |                      |                |                             |                 |   |     | 22              |                   |
| 23                                                              | Advertising                                                                                            |                                                                                                                                 |                      |                |                             |                 |   | 23  | <b>23,421.</b>  |                   |
| 24                                                              | Pension, profit-sharing, etc., plans                                                                   |                                                                                                                                 |                      |                |                             |                 |   | 24  |                 |                   |
| 25                                                              | Employee benefit programs                                                                              |                                                                                                                                 |                      |                |                             |                 |   | 25  |                 |                   |
| 26                                                              | Other deductions (attach schedule)                                                                     | <b>SEE STATEMENT</b>                                                                                                            | <b>6</b>             |                |                             |                 |   | 26  | <b>253,127.</b> |                   |
| 27                                                              | <b>Total</b> deductions - Add lines 12 through 26                                                      |                                                                                                                                 |                      |                |                             |                 |   | 27  | <b>845,336.</b> |                   |
| 28                                                              | Taxable income before net operating loss deduction and special deductions (line 11 less line 27)       |                                                                                                                                 |                      |                |                             |                 |   | 28  | <b>501,610.</b> |                   |
| 29                                                              | <b>Less:</b> a Net operating loss deduction <b>SEE STMT</b> <b>8</b>                                   |                                                                                                                                 | 29a                  | <b>90,489.</b> |                             |                 |   |     |                 |                   |
|                                                                 | b Special deductions (Schedule C, line 20)                                                             |                                                                                                                                 | 29b                  |                |                             |                 |   | 29c | <b>90,489.</b>  |                   |
| Tax and Payments                                                | 30                                                                                                     | Taxable income—Line 28 less line 29c                                                                                            |                      |                |                             |                 |   |     | 30              | <b>411,121.</b>   |
|                                                                 | 31                                                                                                     | <b>Total tax</b> (Schedule J, line 10)                                                                                          |                      |                |                             |                 |   |     | 31              | <b>139,781.</b>   |
|                                                                 | 32                                                                                                     | <b>Payments:</b> a 1988 overpayment credited in 1989                                                                            | 32a                  |                |                             |                 |   |     |                 |                   |
|                                                                 | b 1989 estimated tax payments                                                                          | 32b                                                                                                                             | <b>85,000.</b>       |                |                             |                 |   |     |                 |                   |
|                                                                 | c Less 1989 refund applied for on Form 4466                                                            | 32c                                                                                                                             |                      |                |                             |                 |   |     |                 |                   |
|                                                                 | d Bal                                                                                                  | 32d                                                                                                                             | <b>85,000.</b>       |                |                             |                 |   |     |                 |                   |
|                                                                 | e Tax deposited with Form 7004                                                                         | 32e                                                                                                                             | <b>65,000.</b>       |                |                             |                 |   |     |                 |                   |
|                                                                 | f Credit from regulated investment companies (attach Form 2439)                                        | 32f                                                                                                                             |                      |                |                             |                 |   |     |                 |                   |
|                                                                 | g Credit for Federal tax on fuels (attach Form 4136)                                                   | 32g                                                                                                                             |                      |                |                             |                 |   | 32h | <b>150,000.</b> |                   |
|                                                                 | 33                                                                                                     | Enter any <b>penalty</b> for underpayment of estimated tax - Check <input checked="" type="checkbox"/> if Form 2220 is attached |                      |                |                             |                 |   |     | 33              |                   |
|                                                                 | 34                                                                                                     | <b>Tax due</b> - If the total of lines 31 and 33 is larger than line 32h, enter amount owed                                     |                      |                |                             |                 |   |     | 34              |                   |
| 35                                                              | <b>Overpayment</b> - If line 32h is larger than the total of lines 31 and 33, enter amount overpaid    |                                                                                                                                 |                      |                |                             |                 |   | 35  | <b>10,219.</b>  |                   |
| 36                                                              | Enter amount of line 35 you want: <b>Credited to 1990 estimated tax</b> <b>10,219.</b> <b>Refunded</b> |                                                                                                                                 |                      |                |                             |                 |   | 36  |                 |                   |

Please  
Sign  
Here

Under penalties perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true and correct. Complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer

Date

Title

Preparer's  
signature*Alida M. Adamek*Date **AUG 24 1990**Paid  
Preparer's  
Use OnlyFirm's name (or  
yours if self-employed)  
and address**BDO SEIDMAN  
1900 AVE. OF THE STARS, 11TH FLOOR  
LOS ANGELES, CALIFORNIA**Check if  
self  
employed ☐

E.I. No.

**FX-6 Personal Privacy****13-5381590**

ZIP code

**90067**

Instructions are separate. See Page 1 for Paperwork Reduction Act Notice.

# Application for Automatic Extension of Time To File Corporation Income Tax Return

OMB No. 1545-0233  
Expires 8-31-92

Name of corporation  
**MERCURY AEROSPACE, INC.**

Employer identification number  
**95-4114492**

Number and street (or P.O. box number if mail is not delivered to street address)  
**11800 SHERMAN WAY**

City or town, state, and ZIP code  
**NORTH HOLLYWOOD, CA 91605**

Check type of return to be filed:

- |                                               |                                        |                                       |                                         |                                     |
|-----------------------------------------------|----------------------------------------|---------------------------------------|-----------------------------------------|-------------------------------------|
| <input checked="" type="checkbox"/> Form 1120 | <input type="checkbox"/> Form 1120F    | <input type="checkbox"/> Form 1120L   | <input type="checkbox"/> Form 1120-POL  | <input type="checkbox"/> Form 1120S |
| <input type="checkbox"/> Form 1120-A          | <input type="checkbox"/> Form 1120-FSC | <input type="checkbox"/> Form 1120-ND | <input type="checkbox"/> Form 1120-REIT | <input type="checkbox"/> Form 990-C |
| <input type="checkbox"/> Form 1120-DF         | <input type="checkbox"/> Form 1120-H   | <input type="checkbox"/> Form 1120-PC | <input type="checkbox"/> Form 1120-RIC  | <input type="checkbox"/> Form 990-T |

Form 1120F filers: Check here ☐ if you do not have an office or place of business in the U.S.

1a I request an automatic 6-month extension of time until SEPTEMBER 17, 19 90, to file the income tax return of the corporation named above for ☒ calendar year 19 89, or ☐ tax year beginning \_\_\_\_\_, 19 \_\_\_\_\_, and ending \_\_\_\_\_, 19 \_\_\_\_\_.

b If this tax year is for less than 12 months, check reason:

- ☐ Initial return ☐ Final return ☐ Change in accounting period ☐ Consolidated return to be filed

2 If this application also covers subsidiaries to be included in a consolidated return, complete the following:

| Name and address of each member of the affiliated group | Employer identification number | Tax period |
|---------------------------------------------------------|--------------------------------|------------|
|                                                         |                                |            |
|                                                         |                                |            |
|                                                         |                                |            |
|                                                         |                                |            |
|                                                         |                                |            |
|                                                         |                                |            |
|                                                         |                                |            |
|                                                         |                                |            |
|                                                         |                                |            |

3 Tentative tax (see instructions)

4 Credits:

a Overpayment credited from prior year

4a

b Estimated tax payments for the tax year

4b 85,000

c Less refund for the tax year applied for on Form 4466

4c ( ) Bal

e Credit from regulated investment companies

4d 85,000

f Credit for Federal tax on fuels

4e

4f

5 Total—Add lines 4d through 4f

6 Balance due—Line 3 less line 5. Deposit this amount with a Federal Tax Deposit (FTD) Coupon (see instructions)

Signature.—Under penalties of perjury, I declare that I have been authorized by the above-named corporation to make this application, and to the best of my knowledge and belief, the statements made are true, correct, and complete.

Alida M. Adamek  
(Signature of officer or agent)

CPA  
(Title)

3/7/90  
(Date)

**Schedule A** Cost of Goods Sold and/or Operations (See instructions for line 2, page 1.)

|     |                                                                                                       |    |            |
|-----|-------------------------------------------------------------------------------------------------------|----|------------|
| 1   | Inventory at beginning of year . . . . .                                                              | 1  | 1,263,894. |
| 2   | Purchases . . . . .                                                                                   | 2  | 604,782.   |
| 3   | Cost of labor . . . . .                                                                               | 3  | 2,617,521. |
| 4 a | Additional section 263A costs (attach schedule) . . . . .                                             | 4a | 77,704.    |
| b   | Other costs (attach schedule) . . . . . SEE STATEMENT 2                                               | 4b | 1,286,010. |
| 5   | Total - Add lines 1 through 4b. . . . .                                                               | 5  | 5,849,911. |
| 6   | Inventory at end of year . . . . .                                                                    | 6  | 1,466,499. |
| 7   | Cost of goods sold and/or operations - Line 5 less line 6. Enter here and on line 2, page 1 . . . . . | 7  | 4,383,412. |

8 a Check all methods used for valuing closing inventory:

- (i) ☐ Cost (ii) ☒ Lower of cost or market as described in Regulations section 1.471-4  
 (iii) ☐ Writedown of "subnormal" goods as described in Regulations section 1.471-2(c)  
 (iv) ☐ Other (Specify method used and attach explanation.) ▶

b Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970). ☐

c If the LIFO inventory method was used for this tax year, enter percentage (or amounts) of closing inventory computed under LIFO 8c

d Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the corporation? ☒ Yes ☐ No

e Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation ☐ Yes ☒ No

**Schedule C** Dividends and Special Deductions

|                                                                                                                                                             | (a) Dividends received | (b) %       | (c) Special deductions:<br>(a) x (b) |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-------------|--------------------------------------|
| 1 Dividends from less-than-20%-owned domestic corporations that are subject to the 70% deduction (other than debt-financed stock) . . . . .                 |                        | 70          |                                      |
| 2 Dividends from 20%-or-more-owned domestic corporations that are subject to the 80% deduction (other than debt-financed stock) . . . . .                   |                        | 80          |                                      |
| 3 Dividends on debt-financed stock of domestic and foreign corporations (section 246A)                                                                      |                        | See Instrs. |                                      |
| 4 Dividends on certain preferred stock of less-than-20%-owned public utilities . . . . .                                                                    |                        | 41.176      |                                      |
| 5 Dividends on certain preferred stock of 20%-or-more-owned public utilities . . . . .                                                                      |                        | 47.059      |                                      |
| 6 Dividends from less-than-20%-owned foreign corporations and certain FSCs that are subject to the 70% deduction . . . . .                                  |                        | 70          |                                      |
| 7 Dividends from 20%-or-more-owned foreign corporations and certain FSCs that are subject to the 80% deduction . . . . .                                    |                        | 80          |                                      |
| 8 Dividends from wholly-owned foreign subsidiaries subject to the 100% deduction (section 245(b)).                                                          |                        | 100         |                                      |
| 9 Total - Add lines 1 through 8. See instructions for limitation . . . . .                                                                                  |                        |             |                                      |
| 10 Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958 . . . . . |                        | 100         |                                      |
| 11 Dividends from certain FSCs that are subject to the 100% deduction (section 245(c)(1))                                                                   |                        | 100         |                                      |
| 12 Dividends from affiliated group members subject to the 100% deduction (section 243(a)(3)) . . . . .                                                      |                        | 100         |                                      |
| 13 Other dividends from foreign corporations not included on lines 3, 6, 7, 8, or 11 . . . . .                                                              |                        |             |                                      |
| 14 Income from controlled foreign corporations under subpart F (attach Forms 5471) . . . . .                                                                |                        |             |                                      |
| 15 Foreign dividend gross-up (section 78) . . . . .                                                                                                         |                        |             |                                      |
| 16 IC-DISC and former DISC dividends not included on lines 1, 2, or 3 (section 246(d)) . . . . .                                                            |                        |             |                                      |
| 17 Other dividends . . . . .                                                                                                                                |                        |             |                                      |
| 18 Deduction for dividends paid on certain preferred stock of public utilities . . . . .                                                                    |                        |             |                                      |
| 19 Total dividends - Add lines 1 through 17. Enter here and on line 4, page 1 . . . . . ▶                                                                   |                        |             |                                      |
| 20 Total deductions - Add lines 9, 10, 11, 12, and 18. Enter here and on line 29b, page 1 . . . . . ▶                                                       |                        |             |                                      |

**Schedule E** Compensation of Officers (See instructions for line 12, page 1.)

Complete Schedule E only if total receipts (line 1a, plus lines 4 through 10, of page 1, Form 1120) are \$500,000 or more.

| (a) Name of officer | (b) Social security number                                                             | (c) Percent of time devoted to business | Percent of corporation stock owned |               | (f) Amount of compensation |
|---------------------|----------------------------------------------------------------------------------------|-----------------------------------------|------------------------------------|---------------|----------------------------|
|                     |                                                                                        |                                         | (d) Common                         | (e) Preferred |                            |
| 1                   |                                                                                        | %                                       | %                                  | %             |                            |
|                     |                                                                                        | %                                       | %                                  | %             |                            |
|                     |                                                                                        | %                                       | %                                  | %             |                            |
|                     |                                                                                        | %                                       | %                                  | %             |                            |
|                     |                                                                                        | %                                       | %                                  | %             |                            |
|                     |                                                                                        | %                                       | %                                  | %             |                            |
| 2                   | Total compensation of officers . . . . .                                               |                                         |                                    |               |                            |
| 3                   | Less: Compensation of officers claimed on Schedule A and elsewhere on return . . . . . |                                         |                                    |               |                            |
| 4                   | Compensation of officers deducted on line 12, page 1 . . . . .                         |                                         |                                    |               |                            |

**Schedule J Tax Computation**

|    |                                                                                                                                                                                                                                                                                                 |                          |          |
|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------|
| 1  | Check if you are a member of a controlled group (see sections 1561 and 1563).                                                                                                                                                                                                                   | <input type="checkbox"/> |          |
| 2  | If the box on line 1 is checked:                                                                                                                                                                                                                                                                |                          |          |
| a  | Enter your share of the \$50,000 and \$25,000 taxable income bracket amounts (in that order):<br>(i) \$ (ii) \$                                                                                                                                                                                 |                          |          |
| b  | Enter your share of the additional 5% tax (not to exceed \$11,750) \$                                                                                                                                                                                                                           |                          |          |
| 3  | Income tax (see instructions to figure the tax). Check this box if the corporation is a qualified personal service corporation <input type="checkbox"/> <b>SEE STATEMENT 9</b>                                                                                                                  | 3                        | 139,781. |
| 4a | Foreign tax credit (attach Form 1118)                                                                                                                                                                                                                                                           | 4a                       |          |
| 4b | Possessions tax credit (attach Form 5735).                                                                                                                                                                                                                                                      | 4b                       |          |
| 4c | Orphan drug credit (attach Form 6765).                                                                                                                                                                                                                                                          | 4c                       |          |
| 4d | Credit for fuel produced from a nonconventional source.                                                                                                                                                                                                                                         | 4d                       |          |
| e  | General business credit. Enter here and check which forms are attached:<br><input type="checkbox"/> Form 3800 <input type="checkbox"/> Form 3468 <input type="checkbox"/> Form 5884<br><input type="checkbox"/> Form 6478 <input type="checkbox"/> Form 6765 <input type="checkbox"/> Form 8586 | 4e                       |          |
| f  | Credit for prior year minimum tax (attach Form 8801).                                                                                                                                                                                                                                           | 4f                       |          |
| 5  | Total - Add lines 4a through 4f                                                                                                                                                                                                                                                                 | 5                        | 0.       |
| 6  | Line 3 less line 5                                                                                                                                                                                                                                                                              | 6                        | 139,781. |
| 7  | Personal holding company tax (attach Schedule PH (Form 1120)).                                                                                                                                                                                                                                  | 7                        |          |
| 8  | Recapture taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611.                                                                                                                                                                                          | 8                        |          |
| 9a | Alternative minimum tax (attach Form 4626).                                                                                                                                                                                                                                                     | 9a                       |          |
| 9b | Environmental tax (attach Form 4626).                                                                                                                                                                                                                                                           | 9b                       |          |
| 10 | Total tax - Add lines 6 through 9b. Enter here and on line 31, page 1.                                                                                                                                                                                                                          | 10                       | 139,781. |

**Additional Information** (See instruction F.)

**H** Refer to the list in the instructions and state the principal:

(1) Business activity code no. **3998**

(2) Business activity **MANUFACTURING**

(3) Product or service **FASTENERS**

**I** (1) Did the corporation at the end of the tax year own, directly or indirectly, 50% or more of the voting stock of a domestic corporation? (For rules of attribution, see section 267(c).) ☒ Yes ☐ No  
If "Yes," attach a schedule showing: (a) name, address, and identifying number; (b) percentage owned; and (c) taxable income or (loss) before NOL and special deductions of such corporation for the tax year ending with or within your tax year.

(2) Did any individual, partnership, corporation, estate, or trust at the end of the tax year own, directly or indirectly, 50% or more of the corporation's voting stock? (For rules of attribution, see section 267(c).) If "Yes," complete (a) through (c) ☒ Yes ☐ No

(a) Attach a schedule showing name, address, and identifying number.

(b) Enter percentage owned **SEE STMT 1**

(c) Was the owner of such voting stock a person other than a U.S. person? **Note:** If "Yes," the corporation may have to file Form 5472. ☒ Yes ☐ No

If "Yes," enter owner's country **SEE STMT 1**

**J** Was the corporation a U.S. shareholder of any controlled foreign corporation? (See sections 951 and 957.) ☒ Yes ☐ No

If "Yes," attach Form 5471 for each such corporation.

**K** At any time during the tax year, did the corporation have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? ☒ Yes ☐ No  
(See instruction F and filing requirements for form TDF 90-22.1.)  
If "Yes," enter name of foreign country

**L** Was the corporation the grantor of, or transferor to, a foreign trust that existed during the current tax year, whether or not the corporation has any beneficial interest in it? ☒ Yes ☐ No  
If "Yes," the corporation may have to file Forms 3520, 3520-A, or 926.

**M** During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? (See sections 301 and 316.) ☒ Yes ☐ No  
If "Yes," file Form 5452. If this is a consolidated return, answer here for parent corporation and on Form 851, Affiliations Schedule, for each subsidiary.

**N** During this tax year, did the corporation maintain any part of its accounting/tax records on a computerized system? ☒ Yes ☐ No

**O** Check method of accounting:

(1) ☐ Cash (2) ☒ Accrual  
(3) ☐ Other (specify) **SEE STMT 1**

**P** Check this box if the corporation issued publicly offered debt instruments with original issue discount ☐ Yes ☒ No  
If so, the corporation may have to file Form 8281.

**Q** Enter the amount of tax-exempt interest received or accrued during the tax year **0.**

**R** Enter the number of shareholders at the end of the tax year if there were 35 or fewer shareholders **1**

Form 1120 (1989)

95-4114492

Page 4

| <b>Schedule L Balance Sheets</b>            |                                                | Beginning of tax year |            | End of tax year |            |
|---------------------------------------------|------------------------------------------------|-----------------------|------------|-----------------|------------|
| ASSETS                                      |                                                | (a)                   | (b)        | (c)             | (d)        |
| 1                                           | Cash                                           |                       | 111,539.   |                 | 110,389.   |
| 2                                           | a Trade notes and accounts receivable          | 572,331.              |            | 1,165,447.      |            |
|                                             | b Less allowance for bad debts                 |                       | 572,331.   | 11,000.         | 1,154,447. |
| 3                                           | Inventories                                    |                       | 1,251,815. |                 | 1,422,985. |
| 4                                           | U.S. government obligations                    |                       |            |                 |            |
| 5                                           | Tax-exempt securities                          |                       |            |                 |            |
| 6                                           | Other current assets STMT 10                   |                       | 32,114.    |                 | 125,639.   |
| 7                                           | Loans to stockholders                          |                       |            |                 |            |
| 8                                           | Mortgage and real estate loans                 |                       |            |                 |            |
| 9                                           | Other investments                              |                       |            |                 |            |
| 10                                          | a Buildings and other depreciable assets       | 1,027,438.            |            | 1,555,430.      |            |
|                                             | b Less accumulated depreciation                | 225,271.              | 802,167.   | 507,485.        | 1,047,945. |
| 11                                          | a Depletable assets                            |                       |            |                 |            |
|                                             | b Less accumulated depletion                   |                       |            |                 |            |
| 12                                          | Land (net of any amortization)                 |                       |            |                 |            |
| 13                                          | a Intangible assets (amortizable only)         |                       |            |                 |            |
|                                             | b Less accumulated amortization                |                       |            |                 |            |
| 14                                          | Other assets STMT 11                           |                       |            |                 | 161,111.   |
| 15                                          | Total assets                                   |                       | 2,769,966. |                 | 4,022,516. |
| <b>Liabilities and Stockholders' Equity</b> |                                                |                       |            |                 |            |
| 16                                          | Accounts payable                               |                       | 343,963.   |                 | 511,762.   |
| 17                                          | Mtges., notes, bonds payable in less than 1 yr |                       |            |                 | 250,000.   |
| 18                                          | Other current liabilities STMT 12              |                       | 74,798.    |                 | 215,025.   |
| 19                                          | Loans from stockholders                        |                       |            |                 |            |
| 20                                          | Mtges., notes, bonds payable in 1 yr. or more  |                       |            |                 |            |
| 21                                          | Other liabilities STMT 13                      |                       | 1,311,719. |                 | 1,661,038. |
| 22                                          | Capital stock: a Preferred stock               |                       |            |                 |            |
|                                             | b Common stock                                 | 100,000.              | 100,000.   | 100,000.        | 100,000.   |
| 23                                          | Paid-in or capital surplus                     |                       | 1,100,000. |                 | 1,100,000. |
| 24                                          | Retained earnings—Appropriated                 |                       |            |                 |            |
| 25                                          | Retained earnings—Unappropriated               |                       | -160,514.  |                 | 184,691.   |
| 26                                          | Less cost of treasury stock                    |                       |            |                 |            |
| 27                                          | Total liabilities and stockholders' equity     |                       | 2,769,966. |                 | 4,022,516. |

**Schedule M-1 Reconciliation of Income per Books With Income per Return**

(You are not required to complete this schedule if the total assets on line 15, column (d), of Schedule L are less than \$25,000.)

|         |                                                                                      |          |         |                                                                                |          |
|---------|--------------------------------------------------------------------------------------|----------|---------|--------------------------------------------------------------------------------|----------|
| 1       | Net income per books                                                                 | 345,205. | 7       | Income recorded on books this year not included on this return (itemize):      |          |
| 2       | Federal income tax                                                                   | 195,500. |         | a Tax-exempt interest                                                          |          |
| 3       | Excess of capital losses over capital gains                                          |          | STMT 18 | 61,812.                                                                        | 61,812.  |
| 4       | Income subject to tax not recorded on books this year (itemize):<br>SEE STATEMENT 16 | -2,869.  | 8       | Deductions on this return not charged against book income this year (itemize): |          |
| 5       | Expenses recorded on books this year not deducted on this return (itemize):          |          |         | a Depreciation \$                                                              |          |
|         | a Depreciation \$ 1,430.                                                             |          |         | b Contributions carryover \$                                                   |          |
|         | b Contributions carryover \$                                                         |          | STMT 19 | 88,530.                                                                        | 88,530.  |
|         | c Travel and entertainment \$ 821.                                                   |          |         |                                                                                |          |
| STMT 17 | 111,865.                                                                             | 114,116. | 9       | Total of lines 7 and 8                                                         | 150,342. |
| 6       | Total of lines 1 through 5                                                           | 651,952. | 10      | Income (line 28, page 1) - line 6 less line 9                                  | 501,610. |

**Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (line 25, Schedule L)**

(You are not required to complete this schedule if the total assets on line 15, column (d), of Schedule L are less than \$25,000.)

|   |                              |           |   |                                             |          |
|---|------------------------------|-----------|---|---------------------------------------------|----------|
| 1 | Balance at beginning of year | -160,514. | 5 | Distributions: a Cash                       |          |
| 2 | Net income per books         | 345,205.  |   | b Stock                                     |          |
| 3 | Other increases (itemize):   |           |   | c Properly                                  |          |
|   |                              |           | 6 | Other decreases (itemize):                  |          |
|   |                              |           |   |                                             |          |
| 4 | Total of lines 1, 2, and 3   | 184,691.  | 7 | Total of lines 5 and 6                      |          |
|   |                              |           | 8 | Balance at end of year (line 4 less line 7) | 184,691. |

Form **2220**  
Department of the Treasury  
Internal Revenue Service

**Underpayment of Estimated Tax by Corporations**

▶ Attach to your tax return.

OMB No. 1545-0142

**1989**

Name

MERCURY AEROSPACE, INC.

Employer identification number

95-4114492

**Note:** In most cases, IRS can figure the penalty for the corporation and you do not have to complete this form. See the separate instructions for more information.

**Part I Figuring Your Underpayment**

|    |                                                                                                                                                                                                                                                                                                           |     |         |         |         |          |
|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|---------|---------|---------|----------|
| 1  | Total tax                                                                                                                                                                                                                                                                                                 | 1   | 139,781 |         |         |          |
| 2  | a Personal holding company tax included on line 1 (Schedule PH (Form 1120), line 15)                                                                                                                                                                                                                      | 2a  |         |         |         |          |
|    | b Credit for Federal tax on fuels                                                                                                                                                                                                                                                                         | 2b  |         |         |         |          |
|    | c Total - Add lines 2a and 2b                                                                                                                                                                                                                                                                             | 2c  |         |         |         |          |
| 3  | Subtract line 2c from line 1. If the result is less than \$500, do not complete the rest of this form. You do not owe the penalty                                                                                                                                                                         | 3   | 139,781 |         |         |          |
| 4  | a Enter 90% of line 3                                                                                                                                                                                                                                                                                     | 4a  | 125,803 |         |         |          |
|    | b Enter the tax shown on your 1988 return. (Caution: See instructions before completing this line.)                                                                                                                                                                                                       | 4b  |         |         |         |          |
|    | c Enter the lesser of line 4a or line 4b                                                                                                                                                                                                                                                                  | 4c  | 125,803 |         |         |          |
| 5  | Enter in columns (a) through (d) the installment due dates (the 15th day of the 4th, 6th, 9th, and 12th months of your tax year)                                                                                                                                                                          | (a) | (b)     | (c)     | (d)     |          |
| 6  | Enter 25% of line 4c in columns (a) through (d) unless a or b below applies to the corporation:                                                                                                                                                                                                           | 5   | 4/17/89 | 6/15/89 | 9/15/89 | 12/15/89 |
|    | a If you use the annualized income installment method and/or the adjusted seasonal installment method, complete the worksheet in the instructions and enter the amount from line 45 in each column of line 6. Also check this box <input checked="" type="checkbox"/> and attach a copy of the worksheet. | 6   | 0       | 0       | 23,483  | 35,016   |
|    | b <input type="checkbox"/> If you are a "large corporation," check this box and see the instructions for the amount to enter in each column of line 6.                                                                                                                                                    | 7   | 0       | 0       | 25,000  | 60,000   |
| 7  | Complete lines 7 through 14 for one column before completing the next column. Amount paid or credited for each period. (For column (a) only, enter the amount from line 7 on line 11.)                                                                                                                    | 8   |         | 0       | 0       | 1,517    |
| 8  | Enter amount, if any, from line 14 of previous column                                                                                                                                                                                                                                                     | 9   |         | 0       | 25,000  | 61,517   |
| 9  | Add lines 7 and 8                                                                                                                                                                                                                                                                                         | 10  |         | 0       | 0       | 0        |
| 10 | Add amounts on lines 12 and 13 of the previous column and enter the result                                                                                                                                                                                                                                | 11  | 0       | 0       | 25,000  | 61,517   |
| 11 | Subtract line 10 from line 9. If less than zero, enter zero. (For column (a) only, enter the amount from line 7.)                                                                                                                                                                                         | 12  |         | 0       | 0       | 0        |
| 12 | Remaining underpayment from previous period. If the amount on line 11 is zero, subtract line 9 from line 10 and enter the result. Otherwise, enter zero.                                                                                                                                                  | 13  | 0       | 0       | 0       | 0        |
| 13 | Underpayment. If line 11 is less than or equal to line 6, subtract line 11 from line 6 and enter the result. Then go to line 7 of the next column. Otherwise, go to line 14.                                                                                                                              | 14  | 0       | 0       | 1,517   | 26,501   |
| 14 | Overpayment. If line 6 is less than line 11, subtract line 6 from line 11 and enter the result. Then go to line 7 of the next column.                                                                                                                                                                     |     |         |         |         |          |

**Part II Figuring the Penalty**

|    |                                                                                                                                                                                       |    |          |          |          |          |
|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----------|----------|----------|----------|
| 15 | Enter the date of payment or the 15th day of the 3rd month after the close of the tax year, whichever is earlier. (Form 990-PF and 990-T filers: Use 5th month instead of 3rd month.) | 15 | SEE STMT | SEE STMT | SEE STMT | SEE STMT |
| 16 | Number of days from due date of installment on line 5 to the date shown on line 15.                                                                                                   | 16 |          |          |          |          |
| 17 | No. of days on line 16 after 4/15/89 and before 10/1/89                                                                                                                               | 17 |          |          |          |          |
| 18 | No. of days on line 16 after 9/30/89 and before 4/1/90                                                                                                                                | 18 |          |          |          |          |
| 19 | No. of days on line 16 after 3/31/90 and before 7/1/90                                                                                                                                | 19 |          |          |          |          |
| 20 | No. of days on line 16 after 6/30/90 and before 10/1/90                                                                                                                               | 20 |          |          |          |          |
| 21 | No. of days on line 16 after 9/30/90 and before 1/1/91                                                                                                                                | 21 |          |          |          |          |
| 22 | No. of days on line 16 after 12/31/90 and before 2/16/91                                                                                                                              | 22 |          |          |          |          |
| 23 | No. of days on line 17 $\times 12\%$ x underpayment on line 13                                                                                                                        | 23 |          |          |          |          |
| 24 | No. of days on line 18 $\times 11\%$ x underpayment on line 13                                                                                                                        | 24 |          |          |          |          |
| 25 | No. of days on line 19 $\times 9\%$ x underpayment on line 13                                                                                                                         | 25 |          |          |          |          |
| 26 | No. of days on line 20 $\times 8\%$ x underpayment on line 13                                                                                                                         | 26 |          |          |          |          |
| 27 | No. of days on line 21 $\times 7\%$ x underpayment on line 13                                                                                                                         | 27 |          |          |          |          |
| 28 | No. of days on line 22 $\times 6\%$ x underpayment on line 13                                                                                                                         | 28 |          |          |          |          |
| 29 | Add lines 23 through 28                                                                                                                                                               | 29 | 0        | 0        | 0        | 0        |

30 **Penalty.** Add columns (a) through (d), line 29. Enter here and on line 33, Form 1120; line 29, Form 1120-A; or comparable line for other income tax returns

\*If the corporation's tax year ends after December 31, 1989, see the instructions for lines 25 through 28.

30

0

**Worksheet to Figure Required Installments Using the Annualized Income  
or Adjusted Seasonal Installment Methods Under Section 6655(e)**

| <b>Part I Annualized Income Installment Method</b>                                                                                                                                                                                                 |     | (a)            | (b)            | (c)            | (d)             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------|----------------|----------------|-----------------|
|                                                                                                                                                                                                                                                    |     | <b>Period</b>  |                |                |                 |
|                                                                                                                                                                                                                                                    |     |                | First 3 months | First 6 months | First 9 months  |
| (1) Enter your taxable income for each period.                                                                                                                                                                                                     | 1   |                | -37,890        | 66,075         | 157,210         |
| (2) Annualization amounts.                                                                                                                                                                                                                         | 2   |                | 4              | 2              | 1.33333         |
| (3) Multiply line 1 by line 2.                                                                                                                                                                                                                     | 3   |                | -151,560       | 132,150        | 209,613         |
| <b>Form 990-PF and 990-T filers: Do not use the periods shown directly above line 4 or the annualization amounts shown on line 5 when figuring lines 4 and 6. Instead, see the instructions for worksheet lines 4 and 6 to figure these lines.</b> |     |                | <b>Period</b>  |                |                 |
|                                                                                                                                                                                                                                                    |     | First 3 months | First 5 months | First 8 months | First 11 months |
| (4) Enter your taxable income for each period.                                                                                                                                                                                                     | 4   | -37,890        | -63,150        |                |                 |
| (5) Annualization amounts.                                                                                                                                                                                                                         | 5   | 4              | 2.4            | 1.5            | 1.09091         |
| (6) Multiply line 4 by line 5.                                                                                                                                                                                                                     | 6   | -151,560       | -151,560       |                |                 |
| (7) Annualized taxable income. In column (a), enter the amount from line 6, column (a). In columns (b), (c), and (d), enter the <b>lesser</b> of the amounts in each column on line 3 or line 6.                                                   | 7   | -151,560       | -151,560       | 132,150        | 209,613         |
| (8) Figure your tax on the amount in each column on line 7 using the instructions for Form 1120, Schedule J, line 3 (or the comparable line of your return).                                                                                       | 8   |                |                | 34,789         | 64,999          |
| (9) Enter other taxes for each payment period.                                                                                                                                                                                                     | 9   |                |                |                |                 |
| (10) Total tax. Add lines 8 and 9.                                                                                                                                                                                                                 | 10  |                |                | 34,789         | 64,999          |
| (11) For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2b.                                                                                                                                                      | 11  |                |                |                |                 |
| (12) Total tax after credits. Subtract line 11 from line 10. If less than zero, enter zero.                                                                                                                                                        | 12  |                |                | 34,789         | 64,999          |
| (13) Applicable percentage.                                                                                                                                                                                                                        | 13  | 22.5%          | 45%            | 67.5%          | 90%             |
| (14) Multiply line 12 by line 13.                                                                                                                                                                                                                  | 14  | 0              | 0              | 23,483         | 58,499          |
| (15) Enter the combined amounts of line 45 from all preceding columns.                                                                                                                                                                             | 15  |                | 0              | 0              | 23,483          |
| (16) Subtract line 15 from line 14. If less than zero, enter zero.                                                                                                                                                                                 | 16  | 0              | 0              | 23,483         | 35,016          |
| <b>Part II Adjusted Seasonal Installment Method (Caution: You may use this method only if the base period percentage for any 6 consecutive months is at least 70%.)</b>                                                                            |     |                |                |                |                 |
|                                                                                                                                                                                                                                                    |     | (a)            | (b)            | (c)            | (d)             |
|                                                                                                                                                                                                                                                    |     | <b>Period</b>  |                |                |                 |
|                                                                                                                                                                                                                                                    |     | First 3 months | First 5 months | First 8 months | First 11 months |
| (17) Enter your taxable income for the following periods:                                                                                                                                                                                          |     |                |                |                |                 |
| a Tax year beginning in 1986                                                                                                                                                                                                                       | 17a |                |                |                |                 |
| b Tax year beginning in 1987                                                                                                                                                                                                                       | 17b |                |                |                |                 |
| c Tax year beginning in 1988                                                                                                                                                                                                                       | 17c |                |                |                |                 |
| (18) Enter your taxable income for each period for your tax year beginning in 1989.                                                                                                                                                                | 18  |                |                |                |                 |
|                                                                                                                                                                                                                                                    |     | <b>Period</b>  |                |                |                 |
|                                                                                                                                                                                                                                                    |     | First 4 months | First 6 months | First 9 months | Entire Year     |
| (19) Enter your taxable income for the following periods:                                                                                                                                                                                          |     |                |                |                |                 |
| a Tax year beginning in 1986                                                                                                                                                                                                                       | 19a |                |                |                |                 |
| b Tax year beginning in 1987                                                                                                                                                                                                                       | 19b |                |                |                |                 |
| c Tax year beginning in 1988                                                                                                                                                                                                                       | 19c |                |                |                |                 |
| (20) Divide the amount in each column on line 17a by the amount in column (d) on line 19a.                                                                                                                                                         | 20  |                |                |                |                 |
| (21) Divide the amount in each column on line 17b by the amount in column (d) on line 19b.                                                                                                                                                         | 21  |                |                |                |                 |
| (22) Divide the amount in each column on line 17c by the amount in column (d) on line 19c.                                                                                                                                                         | 22  |                |                |                |                 |

|                                                                                                                                                                                |    | (a) | (b) | (c) | (d) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|-----|-----|-----|
| (23) Add lines 20 through 22.                                                                                                                                                  | 23 |     |     |     |     |
| (24) Base period percentage for months before filing month. Divide line 23 by three (3).                                                                                       | 24 |     |     |     |     |
| (25) Divide line 18 by line 24.                                                                                                                                                | 25 |     |     |     |     |
| (26) Figure your tax on the amount on line 25 using the instructions for Form 1120, Schedule J, line 3 (or the comparable line of your return).                                | 26 |     |     |     |     |
| (27) Divide the amount in columns (a) through (c) on line 19a by the amount in column (d) on line 19a.                                                                         | 27 |     |     |     |     |
| (28) Divide the amount in columns (a) through (c) on line 19b by the amount in column (d) on line 19b.                                                                         | 28 |     |     |     |     |
| (29) Divide the amount in columns (a) through (c) on line 19c by the amount in column (d) on line 19c.                                                                         | 29 |     |     |     |     |
| (30) Add lines 27 through 29.                                                                                                                                                  | 30 |     |     |     |     |
| (31) Base period percentage for months through and including filing month. Divide line 30 by three (3).                                                                        | 31 |     |     |     |     |
| (32) Multiply the amount in columns (a) through (c) of line 26 by the amount in the corresponding column of line 31. In column (d), enter the amount from line 26, column (d). | 32 |     |     |     |     |
| (33) Enter other taxes for each payment period.                                                                                                                                | 33 |     |     |     |     |
| (34) Total tax. Add lines 32 and 33.                                                                                                                                           | 34 |     |     |     |     |
| (35) For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2b.                                                                                  | 35 |     |     |     |     |
| (36) Total tax after credits. Subtract line 35 from line 34. If less than zero, enter zero.                                                                                    | 36 |     |     |     |     |
| (37) Multiply line 36 by 90%.                                                                                                                                                  | 37 |     |     |     |     |
| (38) Enter the combined amounts of line 45 from all preceding columns.                                                                                                         | 38 |     |     |     |     |
| (39) Subtract line 38 from line 37. If less than zero, enter zero.                                                                                                             | 39 |     |     |     |     |

**Part III** Computation of Required Installments

|                                                                                                                                                                                                                |    | 1st<br>installment | 2nd<br>installment | 3rd<br>installment | 4th<br>installment |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--------------------|--------------------|--------------------|--------------------|
| (40) If you completed one of the above parts, enter the amounts in each column from line 16 or line 39. (If you completed both parts, enter the lesser of the amounts in each column from line 16 or line 39.) | 40 | 0                  | 0                  | 23,483             | 35,016             |
| (41) Divide line 4c, Form 2220, by four (4) and enter the result in each column. (Note: "Large corporations" see line 6(b) instructions on page 1 for the amount to enter.)                                    | 41 | 31,451             | 31,451             | 31,451             | 31,451             |
| (42) Enter the amount from line 44 of this worksheet for the preceding column.                                                                                                                                 | 42 |                    | 31,451             | 62,902             | 70,870             |
| (43) Add lines 41 and 42 and enter the total.                                                                                                                                                                  | 43 | 31,451             | 62,902             | 94,353             | 102,321            |
| (44) If line 43 is more than line 40, subtract line 40 from line 43. Otherwise, enter zero.                                                                                                                    | 44 | 31,451             | 62,902             | 70,870             |                    |
| (45) Enter the lesser of line 40 or line 43 here and on Form 2220, line 6.                                                                                                                                     | 45 | 0                  | 0                  | 23,483             | 35,016             |

STATEMENT - RECORD AND APPLICATION OF ESTIMATED TAX  
PAYMENTS AND CREDITS

INSTALLMENT 3

|                       |   |         |        |        |
|-----------------------|---|---------|--------|--------|
|                       | 1 | 9/15/89 | 25,000 |        |
| TOTAL - INSTALLMENT 3 |   |         |        | 25,000 |
|                       |   |         |        | =====  |

INSTALLMENT 4

|                       |   |          |        |        |
|-----------------------|---|----------|--------|--------|
|                       | 2 | 12/15/89 | 60,000 |        |
| TOTAL - INSTALLMENT 4 |   |          |        | 60,000 |
|                       |   |          |        | =====  |

|                                          |  |  |  |        |
|------------------------------------------|--|--|--|--------|
| TOTAL ESTIMATED TAX PAYMENTS AND CREDITS |  |  |  | 85,000 |
|                                          |  |  |  | =====  |

APPLICATION OF PAYMENTS

|         | -----INSTALLMENT----- |        |        |        |
|---------|-----------------------|--------|--------|--------|
| PAYMENT | FIRST                 | SECOND | THIRD  | FOURTH |
| 1       |                       |        | 25,000 |        |
| 2       |                       |        |        | 60,000 |

-----

Form **4626**  
Department of the Treasury  
Internal Revenue Service

# Alternative Minimum Tax - Corporations (including environmental tax)

▶ See separate instructions.  
▶ Attach to your tax return.

OMB No. 1545-0175

**1989**

Name as shown on tax return

Employer identification number

MERCURY AEROSPACE, INC.

95-4114492

|    |                                                                                                                                                                                                                                                                                                                        |    |         |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---------|
| 1  | Taxable income or (loss) before net operating loss deduction                                                                                                                                                                                                                                                           | 1  | 501,610 |
| 2  | Adjustments:                                                                                                                                                                                                                                                                                                           |    |         |
| a  | Depreciation of tangible property placed in service after 1986                                                                                                                                                                                                                                                         | 2a | 107,184 |
| b  | Amortization of certified pollution control facilities placed in service after 1986                                                                                                                                                                                                                                    | 2b |         |
| c  | Amortization of mining exploration and development costs paid or incurred after 1986                                                                                                                                                                                                                                   | 2c |         |
| d  | Amortization of circulation expenditures paid or incurred after 1986 (personal holding companies only)                                                                                                                                                                                                                 | 2d |         |
| e  | Basis adjustments in determining gain or loss from sale or exchange of property                                                                                                                                                                                                                                        | 2e |         |
| f  | Long term contracts entered into after February 28, 1986                                                                                                                                                                                                                                                               | 2f |         |
| g  | Installment sales of certain property                                                                                                                                                                                                                                                                                  | 2g |         |
| h  | Merchant marine capital construction funds                                                                                                                                                                                                                                                                             | 2h |         |
| i  | Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)                                                                                                                                                                                                                                | 2i |         |
| j  | Tax shelter farm activities (personal service corporations only)                                                                                                                                                                                                                                                       | 2j |         |
| k  | Passive activities (closely held corporations and personal service corporations only)                                                                                                                                                                                                                                  | 2k |         |
| l  | Certain loss limitations                                                                                                                                                                                                                                                                                               | 2l |         |
| m  | Other                                                                                                                                                                                                                                                                                                                  | 2m |         |
| n  | Combine lines 2a through 2m                                                                                                                                                                                                                                                                                            | 2n | 107,184 |
| 3  | Tax preference items:                                                                                                                                                                                                                                                                                                  |    |         |
| a  | Depletion                                                                                                                                                                                                                                                                                                              | 3a |         |
| b  | Tax-exempt interest from private activity bonds issued after August 7, 1986                                                                                                                                                                                                                                            | 3b |         |
| c  | Appreciated property charitable deduction                                                                                                                                                                                                                                                                              | 3c |         |
| d  | Add lines 3a through 3c                                                                                                                                                                                                                                                                                                | 3d |         |
| e  | Intangible drilling costs                                                                                                                                                                                                                                                                                              | 3e |         |
| f  | Reserves for losses on bad debts of financial institutions                                                                                                                                                                                                                                                             | 3f |         |
| g  | Accelerated depreciation of real property placed in service before 1987                                                                                                                                                                                                                                                | 3g |         |
| h  | Accelerated depreciation of leased personal property placed in service before 1987 (personal holding companies only)                                                                                                                                                                                                   | 3h |         |
| i  | Amortization of certified pollution control facilities placed in service before 1987                                                                                                                                                                                                                                   | 3i |         |
| j  | Add lines 3e through 3i                                                                                                                                                                                                                                                                                                | 3j |         |
| 4  | Combine lines 1, 2n, 3d, and 3j                                                                                                                                                                                                                                                                                        | 4  | 608,794 |
| 5  | Excess book income adjustment:                                                                                                                                                                                                                                                                                         |    |         |
| a  | Enter your adjusted net book income SEE STATEMENT 15                                                                                                                                                                                                                                                                   | 5a | 540,705 |
| b  | Subtract line 4 from line 5a (even if one or both of these figures is a negative number). (Enter zero if the result is zero or less)                                                                                                                                                                                   | 5b | 0       |
| c  | Multiply line 5b by 50%                                                                                                                                                                                                                                                                                                | 5c |         |
| 6  | Combine lines 4 and 5c. If zero or less, stop here (you are not subject to the alternative minimum tax)                                                                                                                                                                                                                | 6  | 608,794 |
| 7  | Alternative tax net operating loss deduction. (Do not enter more than 90% of line 6) SEE STMT 14                                                                                                                                                                                                                       | 7  | 45,508  |
| 8  | Alternative minimum taxable income (subtract line 7 from line 6)                                                                                                                                                                                                                                                       | 8  | 563,286 |
| 9  | Exemption phase-out computation:                                                                                                                                                                                                                                                                                       |    |         |
| a  | Tentative exemption amount. Enter \$40,000 (members of a controlled group, see instructions)                                                                                                                                                                                                                           | 9a | 40,000  |
| b  | Enter \$150,000 (members of a controlled group, see instructions)                                                                                                                                                                                                                                                      | 9b | 150,000 |
| c  | Subtract line 9b from line 8. If zero or less, enter zero                                                                                                                                                                                                                                                              | 9c | 413,286 |
| d  | Multiply line 9c by 25%                                                                                                                                                                                                                                                                                                | 9d | 103,322 |
| e  | Exemption. Subtract line 9d from line 9a. If zero or less, enter zero                                                                                                                                                                                                                                                  | 9e | 0       |
| 10 | Subtract line 9e from line 8. If zero or less, enter zero                                                                                                                                                                                                                                                              | 10 | 563,286 |
| 11 | Multiply line 10 by 20%                                                                                                                                                                                                                                                                                                | 11 | 112,657 |
| 12 | Alternative minimum tax foreign tax credit                                                                                                                                                                                                                                                                             | 12 | 0       |
| 13 | Tentative minimum tax (subtract line 12 from line 11)                                                                                                                                                                                                                                                                  | 13 | 112,657 |
| 14 | General business credit allowed against alternative minimum tax                                                                                                                                                                                                                                                        | 14 |         |
| 15 | Regular tax liability before all credits except the foreign tax credit and possessions tax credit                                                                                                                                                                                                                      | 15 | 139,781 |
| 16 | Alternative minimum tax -Add lines 14 and 15 and subtract the total from line 13. If the result is greater than zero, enter on line 9a, Schedule J, Form 1120, or on the comparable line of other income tax returns                                                                                                   | 16 | 0       |
| 17 | Environmental tax- Subtract \$2,000,000 from line 6 (computed without regard to your environmental tax deduction), and multiply the result, if any, by 0.12% (.0012). Enter on line 9b, Schedule J, Form 1120, or on the comparable line of other income tax returns (members of a controlled group, see instructions) | 17 |         |

Form **4797**  
Department of the Treasury  
Internal Revenue Service (4)

**Sales of Business Property**  
(Also, Involuntary Conversions and Recapture Amounts Under  
Sections 179 and 280F)

► Attach to your tax return. See Separate Instructions

OMB No. 1545-0184

**1989**  
Attachment  
Sequence No. 27

Name(s) shown on return

Identifying number

MERCURY AEROSPACE, INC.

95-4114492

**Part I** Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty and Theft - Property Held More Than 1 Year

1 Enter here the gross proceeds from the sale or exchange of real estate reported to you for 1989 on Form(s) 1099-S (or an equivalent statement) that you will be including on lines 2 or 10 (column d), or on line 20. (Form 1099-S is a Statement for Recipients of Proceeds From Real Estate Transactions.)

1

| (a) Description of property | (b) Date acquired (mo., day, yr.) | (c) Date sold (mo., day, yr.) | (d) Gross sales price | (e) Depreciation allowed (or allowable) since acquisition | (f) Cost or other basis, plus improvements and expense of sale | (g) LOSS ((f) minus the sum of (d) and (e)) | (h) GAIN ((d) plus (e) minus (f)) |
|-----------------------------|-----------------------------------|-------------------------------|-----------------------|-----------------------------------------------------------|----------------------------------------------------------------|---------------------------------------------|-----------------------------------|
| 2 FORD TEMPO                | 070188                            | 123189                        | 5000                  | 4158                                                      | 11550                                                          | 2,392                                       |                                   |
| FACTORY EQUIPMENT           | 070187                            | 05 89                         | 0                     | 431                                                       | 908                                                            | 477                                         |                                   |
|                             |                                   |                               |                       |                                                           |                                                                |                                             |                                   |
|                             |                                   |                               |                       |                                                           |                                                                |                                             |                                   |
|                             |                                   |                               |                       |                                                           |                                                                |                                             |                                   |
|                             |                                   |                               |                       |                                                           |                                                                |                                             |                                   |

3 Gain, if any, from Form 4684, Section B, line 21

4 Section 1231 gain from installment sales from Form 6252, line 22 or 30.

5 Gain, if any, from line 32, from other than casualty and theft.

6 Add lines 2 through 5 in columns (g) and (h)

2,869

7 Combine columns (g) and (h) of line 6. Enter gain or (loss) here, and on the appropriate line as follows (partnerships see the Instructions for line references):

-2,869

If line 7 is zero or a loss, enter the amount on line 11 below and skip lines 8 and 9. (S corporations enter the loss on Schedule K (Form 1120S), line 5.) If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain as a long-term capital gain on Schedule D and skip lines 8, 9, and 12 below.

8 Nonrecaptured net section 1231 losses from prior years.

9 Subtract line 8 from line 7. If zero or less, enter zero

If line 9 is zero, enter the amount from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below, and enter the amount from line 9 as a long-term capital gain on Schedule D. See Line-by-Line Instructions for line 9.

**Part II** Ordinary Gains and Losses

| (a) Description of property                                                                              | (b) Date acquired (mo., day, yr.) | (c) Date sold (mo., day, yr.) | (d) Gross sales price | (e) Depreciation allowed (or allowable) since acquisition | (f) Cost or other basis, plus improvements and expense of sale | (g) LOSS ((f) minus the sum of (d) and (e)) | (h) GAIN ((d) plus (e) minus (f)) |
|----------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------|-----------------------|-----------------------------------------------------------|----------------------------------------------------------------|---------------------------------------------|-----------------------------------|
| 10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): |                                   |                               |                       |                                                           |                                                                |                                             |                                   |
|                                                                                                          |                                   |                               |                       |                                                           |                                                                |                                             |                                   |
|                                                                                                          |                                   |                               |                       |                                                           |                                                                |                                             |                                   |
|                                                                                                          |                                   |                               |                       |                                                           |                                                                |                                             |                                   |
|                                                                                                          |                                   |                               |                       |                                                           |                                                                |                                             |                                   |
|                                                                                                          |                                   |                               |                       |                                                           |                                                                |                                             |                                   |

11 Loss, if any, from line 7

2,869

12 Gain, if any, from line 7, or amount from line 8 if applicable

13 Gain, if any, from line 31

14 Net gain or (loss) from Form 4684, Section B, lines 13 and 20a

15 Ordinary gain from installment sales from Form 6252, line(s) 21 and/or 29

16 Recapture of section 179 deduction for partners and S corporation shareholders from property dispositions by partnerships and S corporations.

17 Add lines 10 through 16 in columns (g) and (h).

2,869

18 Combine columns (g) and (h) of line 17. Enter gain or (loss) here, and on the appropriate line as follows:

-2,869

a For all except individual returns: Enter the gain or (loss) from line 18 on the return being filed.

b For individual returns:

(1) If the loss on line 11 includes a loss from Form 4684, Section B, Part II, column (b)(ii), enter that part of the loss here and on line 21 of Schedule A (Form 1040). Identify as from "Form 4797, line 18b(1)"

(2) Redetermine the gain or (loss) on line 18, excluding the loss (if any) on line 18b(1). Enter here and on Form 1040, line 15.

**Part III** Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255

19 Description of sections 1245, 1250, 1252, 1254, and 1255 property:

Date acquired  
(mo., day, yr.)Date sold  
(mo., day, yr.)A  
B  
C  
DRelate lines 19A through 19D  
to these columnsProperty  
AProperty  
BProperty  
CProperty  
D

20 Gross sales price . . . . .

21 Cost or other basis plus expense of sale . . . . .

22 Depreciation (or depletion) allowed (or allowable) . . . . .

23 Adjusted basis, subtract line 22 from line 21 . . . . .

24 Total gain, subtract line 23 from line 20 . . . . .

25 If section 1245 property:

a Depreciation allowed (or allowable) . . . . .

b Enter the **smaller** of line 24 or 25a . . . . .

26 If section 1250 property: If straight line  
depreciation was used, enter zero on line 26g un-  
less you are a corporation subject to section 29t.

a Additional depreciation after 12/31/75 . . . . .

b Applicable percentage multiplied by the **smaller** of  
line 24 or line 26a . . . . .

c Subtract line 26a from line 24. If line 24 is not  
more than line 26a, skip lines 26d and 26e . . . . .

d Add'l depreciation after 12/31/69 & before 1/1/76 . . . . .

e Applicable percentage multiplied by the **smaller**  
of line 26c or 26d . . . . .

f Section 29t amount (for corporations only) . . . . .

g Add lines 26b, 26e, and 26f . . . . .

27 If section 1252 property: Skip this  
section if you did not dispose of farmland or if  
you are a partnership.

a Soil, water, and land clearing expenses . . . . .

b Line 27a multiplied by applicable percentage . . . . .

c Enter the **smaller** of line 24 or 27b . . . . .

28 If section 1254 property:

a Intangible drilling and development costs, expen-  
ditures for development of mines and other natural  
deposits, and mining exploration costs . . . . .

b Enter the **smaller** of line 24 or 28a . . . . .

29 If section 1255 property:

a Applicable percentage of payments excluded from  
income under section 126 . . . . .

b Enter the **smaller** of line 24 or 29a . . . . .

**Summary of Part III Gains** (Complete property columns A through D, through line 29b before going to line 30.)

30 Total gains for all properties (add columns A through D, line 24) . . . . .

31 Add columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13. (see the instructions to Part IV if this is an installment sale) . . . . .

32 Subtract line 31 from line 30. Enter the portion from casualty and theft on Form 4684, Section B, line 15.  
Enter the portion from other than casualty and theft on Form 4797, line 5 . . . . .

**Part IV** Complete This Part Only if You Elect Out of the Installment Method and Report a Note or Other  
Obligation at Less Than Full Face Value

33 Check here if you elect out of the installment method . . . . . ☐

34 Enter the face amount of the note or other obligation . . . . .

35 Enter the percentage of valuation of the note or other obligation . . . . .

**Part V** Computation of Recapture Amounts Under Sections 179 and 280F When Business Use Drops to 50%  
or Less (See instructions for Part V.)

|                                                                                                        | (a) Section 179 | (b) Section 280F |
|--------------------------------------------------------------------------------------------------------|-----------------|------------------|
| 36 Section 179 expense deduction or section 280F recovery deductions . . . . .                         |                 |                  |
| 37 Depreciation or recovery deductions . . . . .                                                       |                 |                  |
| 38 Recapture amount (subtract line 37 from line 36) ( see Instructions for where to report ) . . . . . |                 |                  |

Form **4562**Department of the Treasury  
Internal Revenue Service (4)**Depreciation and Amortization**

▶ See separate instructions.

▶ Attach this form to your return.

OMB No. 1545-0172

**1989**Attachment  
Sequence No. **67**

Name(s) as shown on return

Identifying number

**MERCURY AEROSPACE, INC.****95-4114492**

Business or activity to which this form relates

**Part I****Depreciation** (Use Part III for automobiles, certain other vehicles, computers, and property used for entertainment, recreation, or amusement.)**Section A. - Election To Expense Depreciable Assets (Section 179)**

|                                                                                                          |                            |                  |
|----------------------------------------------------------------------------------------------------------|----------------------------|------------------|
| 1 Maximum dollar limitation . . . . .                                                                    | 1                          | \$10,000         |
| 2 Total cost of section 179 property placed in service during the tax year . . . . .                     | 2                          | <b>38,211.</b>   |
| 3 Threshold cost of section 179 property before reduction in limitation . . . . .                        | 3                          | \$200,000        |
| 4 Reduction in limitation (Subtract line 3 from line 2, but do not enter less than -0-.)                 | 4                          | <b>0.</b>        |
| 5 Dollar limitation for tax year (Subtract line 4 from line 1, but do not enter less than -0-.)          | 5                          | <b>10,000.</b>   |
| (a) Description of property                                                                              | (b) Date placed in service | (c) Cost         |
| 6 SEE STMT 3                                                                                             |                            | <b>38,211</b>    |
|                                                                                                          |                            | (d) Elected cost |
|                                                                                                          |                            | <b>10,000.</b>   |
| 7 Listed property - Enter amount from line 28. . . . .                                                   | 7                          |                  |
| 8 Tentative deduction (Enter the lesser of: (a) line 6 plus line 7; or (b) line 5) . . . . .             | 8                          | <b>10,000.</b>   |
| 9 Taxable income limitation (Enter the lesser of: (a) Taxable income; or (b) line 5.) . . . . .          | 9                          | <b>10,000.</b>   |
| 10 Carryover of disallowed deduction from 1988 . . . . .                                                 | 10                         |                  |
| 11 Section 179 expense deduction (Enter the lesser of: (a) line 8 plus line 10; or (b) line 9) . . . . . | 11                         | <b>10,000.</b>   |
| 12 Carryover of disallowed deduction to 1990 (Add lines 8 and 10, less line 11) ▶ 12                     |                            |                  |

**Section B. - MACRS Depreciation**

| (a) Classification of property                                                                                       | (b) Date placed in service | (c) Basis for depreciation (Business use only) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|----------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------------------------------|---------------------|----------------|------------|----------------------------|
| <b>13 General Depreciation System (GDS): For assets placed in service ONLY during tax year beginning in 1989</b>     |                            |                                                |                     |                |            |                            |
| a 3-year property                                                                                                    |                            |                                                |                     |                |            |                            |
| b 5-year property                                                                                                    |                            |                                                |                     |                |            |                            |
| SEE STMT 7, 3                                                                                                        |                            | <b>20,684</b>                                  |                     |                |            | <b>4,137.</b>              |
| c 7-year property                                                                                                    |                            |                                                |                     |                |            |                            |
| SEE STMT 3                                                                                                           |                            | <b>457,389</b>                                 |                     |                |            | <b>65,361.</b>             |
| d 10-year property                                                                                                   |                            |                                                |                     |                |            |                            |
| e 15-year property                                                                                                   |                            |                                                |                     |                |            |                            |
| f 20-year property                                                                                                   |                            |                                                |                     |                |            |                            |
| g Residential rental property                                                                                        |                            |                                                | 27.5 yrs.           | MM             | S/L        |                            |
|                                                                                                                      |                            |                                                | 27.5 yrs.           | MM             | S/L        |                            |
| h Nonresidential real property                                                                                       |                            |                                                | 31.5 yrs.           | MM             | S/L        |                            |
| SEE STMT 7, 3                                                                                                        |                            | <b>52,377</b>                                  | 31.5 yrs.           | MM             | S/L        | <b>763.</b>                |
| <b>14 Alternative Depreciation System (ADS): For assets placed in service ONLY during tax year beginning in 1989</b> |                            |                                                |                     |                |            |                            |
| a Class life                                                                                                         |                            |                                                |                     |                | S/L        |                            |
| b 12-year                                                                                                            |                            |                                                | 12 yrs.             |                | S/L        |                            |
| c 40-year                                                                                                            |                            |                                                | 40 yrs.             | MM             | S/L        |                            |
| 15 Listed property - Enter amount from line 27. . . . .                                                              |                            |                                                |                     |                |            | <b>2,450.</b>              |
| 16 GDS and ADS deductions for assets placed in service before 1989 STMT 7, 3 . . . . .                               |                            |                                                |                     |                |            | <b>203,846.</b>            |

**Section C. - ACRS and/or Other Depreciation**

|                                                            |    |  |
|------------------------------------------------------------|----|--|
| 17 Property subject to section 168(f)(1) election. . . . . | 17 |  |
| 18 ACRS and/or other depreciation. . . . .                 | 18 |  |

**Section D. - Summary**

|                                                                                                                                                                                     |    |                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----------------|
| 19 Total (Add deductions on line 11 and lines 13 through 18.) Enter here and on the appropriate line of your return (Partnerships and S corporations - see instructions.) . . . . . | 19 | <b>286,557.</b> |
| 20 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . .                                | 20 |                 |

**Part II Amortization**

| (a) Description of property                                                                  | (b) Date amortization begins | (c) Cost or other basis | (d) Code section | (e) Amortization period or percentage | (f) Amortization for this year |
|----------------------------------------------------------------------------------------------|------------------------------|-------------------------|------------------|---------------------------------------|--------------------------------|
| 21 Amortization for property placed in service <b>only</b> during tax year beginning in 1989 |                              |                         |                  |                                       |                                |
| 22 Amortization for property placed in service before 1989                                   |                              |                         |                  | 22                                    |                                |
| 23 Total. Enter here and on "Other Deductions" or "Other Expenses" line of your return       |                              |                         |                  | 23                                    |                                |

**Part III Listed Property.—Automobiles, Certain Other Vehicles, Computers, and Property Used for Entertainment, Recreation, or Amusement**

If you are using the standard mileage rate or deducting vehicle lease expense, complete columns (a) through (d) of Section A, all of Section B, and Section C if applicable.

**Section A. — Depreciation (Caution: See instructions for limitations for automobiles.)**

| 24a Do you have evidence to support the business use claimed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                            |                                 |                                                                | 24b If "Yes," is the evidence written? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                     |            |                            |                              |
|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------|---------------------------------|----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|---------------------|------------|----------------------------|------------------------------|
| (a) Type of property (list vehicles first)                                                                                        | (b) Date placed in service | (c) Business use percentage (%) | (d) Cost or other basis (see instructions for leased property) | (e) Basis for depreciation—business use only                                                               | (f) Recovery period | (g) Method | (h) Depreciation deduction | (i) Elected section 179 cost |
| 25 Property used more than 50% in a trade or business:                                                                            |                            |                                 |                                                                |                                                                                                            |                     |            |                            |                              |
| SEE STMT 7                                                                                                                        |                            |                                 |                                                                | 13,373                                                                                                     |                     |            | 2,450                      |                              |
| 26 Property used 50% or less in a trade or business:                                                                              |                            |                                 |                                                                |                                                                                                            |                     |            |                            |                              |
|                                                                                                                                   |                            |                                 |                                                                |                                                                                                            | S/L                 |            |                            |                              |
|                                                                                                                                   |                            |                                 |                                                                |                                                                                                            | S/L                 |            |                            |                              |
|                                                                                                                                   |                            |                                 |                                                                |                                                                                                            | S/L                 |            |                            |                              |
| 27 Total (Enter here and on line 15, page 1.)                                                                                     |                            |                                 |                                                                |                                                                                                            |                     | 27         | 2,450                      |                              |
| 28 Total (Enter here and on line 7, page 1.)                                                                                      |                            |                                 |                                                                |                                                                                                            |                     | 28         |                            |                              |

**Section B. — Information Regarding Use of Vehicles—If you deduct expenses for vehicles:**

- Always complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.
- If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

|                                                                                  | (a)       |           | (b)       |           | (c)       |           | (d) |    | (e) |    | (f) |    |
|----------------------------------------------------------------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----|----|-----|----|-----|----|
|                                                                                  | Vehicle 1 | Vehicle 2 | Vehicle 3 | Vehicle 4 | Vehicle 5 | Vehicle 6 |     |    |     |    |     |    |
| 29 Total business miles driven during the year (DO NOT include commuting miles). |           |           |           |           |           |           |     |    |     |    |     |    |
| 30 Total commuting miles driven during the year                                  |           |           |           |           |           |           |     |    |     |    |     |    |
| 31 Total other personal (noncommuting) miles driven.                             |           |           |           |           |           |           |     |    |     |    |     |    |
| 32 Total miles driven during the year (Add lines 29 through 31)                  |           |           |           |           |           |           |     |    |     |    |     |    |
|                                                                                  | Yes       | No        | Yes       | No        | Yes       | No        | Yes | No | Yes | No | Yes | No |
| 33 Was the vehicle available for personal use during off-duty hours?             |           | X         |           | X         | X         |           |     |    |     |    |     |    |
| 34 Was the vehicle used primarily by a more than 5% owner or related person?     |           | X         |           | X         | X         |           |     |    |     |    |     |    |
| 35 Is another vehicle available for personal use?                                |           |           |           |           |           |           |     |    |     |    |     |    |

**Section C. — Questions for Employers Who Provide Vehicles for Use by Their Employees**

(Answer these questions to determine if you meet an exception to completing Section B. Note: Section B must always be completed for vehicles used by sole proprietors, partners, or other more than 5% owners or related persons.)

|                                                                                                                                                                                                                          | Yes | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 36 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?                                                                                       |     | X  |
| 37 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? (See instructions for vehicles used by corporate officers, directors, or 1% or more owners.) | X   |    |
| 38 Do you treat all use of vehicles by employees as personal use?                                                                                                                                                        |     | X  |
| 39 Do you provide more than five vehicles to your employees and retain the information received from your employees concerning the use of the vehicles?                                                                  |     | X  |
| 40 Do you meet the requirements concerning qualified automobile demonstration use?                                                                                                                                       |     | X  |
| Note: If your answer to 36, 37, 38, 39, or 40 is "Yes," you need not complete Section B for the covered vehicles.                                                                                                        |     |    |

Form **5472**

(Rev. December 1987)

Department of the Treasury  
Internal Revenue Service**Information Return of a Foreign Owned Corporation**  
(Under Section 6038A of the Internal Revenue Code)For tax year of the reporting corporation beginning JAN 1, 1989 and ending Dec 31, 1989OMB No. 1545-0805  
Expires 11-30-90**Part I Reporting Corporation (All information must be written in the English language)**

1a Name of reporting corporation MERCURY AEROSPACE, INC b Identifying number 95-4114492

2 Enter how many Forms 5472 were filed for the taxable year ONE

**Part II Related Person (All information must be written in the English language)**

1 Name and address of related person  
BLANC - AERO INDUSTRIES  
15, RUE LASSON 75012 PARIS BP 10-75560  
PARIS, CEDEX 12 FRANCE

2 Countries of residence  
FRANCE

3 Type of relationship—Check applicable box:  
Controlled by reporting corporation ☐ Controls reporting corporation ☒ Common control ☐ Other related person ☐

4a Principal business activity MANUFACTURING b Business code number 3998 c Principal cities and countries where business is conducted U.S.A.

**Part III Monetary Transactions Between Reporting Corporations and Related Foreign Person (All amounts must be stated in U.S. dollars) (Reasonable estimates may be used—See Instructions)**

|                                                                                                               |                                        |                                     |
|---------------------------------------------------------------------------------------------------------------|----------------------------------------|-------------------------------------|
| 1 Sales of stock in trade                                                                                     | 1                                      |                                     |
| 2 Sales of tangible property other than stock in trade                                                        | 2                                      |                                     |
| 3 Rents and royalties received (for other than intangible property rights)                                    | 3                                      |                                     |
| 4 Sales, leases, licensings, etc., of intangible property rights (e.g., patents, trademarks, secret formulas) | 4                                      |                                     |
| 5 Consideration received for technical, managerial, engineering, construction, scientific, or like services   | 5                                      |                                     |
| 6 Commissions received                                                                                        | 6                                      |                                     |
| 7 Amounts borrowed                                                                                            | 7a Beginning Balance                   | 7b Ending Balance                   |
| 8 Interest received                                                                                           |                                        |                                     |
| 9 Premiums received for insurance or reinsurance                                                              |                                        |                                     |
| 10 Total (Combine amounts on lines 1 through 9)                                                               |                                        |                                     |
| 11 Purchases of stock in trade                                                                                | 11                                     |                                     |
| 12 Purchases of tangible property other than stock in trade                                                   | 12                                     |                                     |
| 13 Rents and royalties paid (for other than intangible property rights)                                       | 13                                     |                                     |
| 14 Purchases, leases, licensings, etc., of intangible property (e.g., patents, trademarks, secret formulas)   | 14                                     |                                     |
| 15 Consideration paid for technical, managerial, engineering, construction, scientific, or like services      | 15                                     |                                     |
| 16 Commissions paid                                                                                           | 16                                     |                                     |
| 17 Amounts loaned                                                                                             | 17a Beginning Balance <u>1,311,719</u> | 17b Ending Balance <u>1,661,030</u> |
| 18 Interest paid                                                                                              |                                        |                                     |
| 19 Premiums paid for insurance or reinsurance                                                                 |                                        |                                     |
| 20 Total (Combine amounts on lines 11 through 19)                                                             |                                        |                                     |

**Part IV Describe All Nonmonetary and Nonconsideration Transactions Between the Reporting Corporation and the Related Foreign Person (Attach separate sheet) (See Instructions)****Instructions**

(References are to the Internal Revenue Code unless otherwise noted.)

**Paperwork Reduction Act Notice.**—We ask for this information to carry out the U.S. Internal Revenue laws. We need it to ensure that taxpayers are complying with these laws and to allow us to figure and collect the right amount of tax. You are required to give us this information.**Purpose of Form**

Form 5472 is an annual information return that is used for reporting the activities between certain foreign owned corporations and all related parties.

For purposes of Form 5472, a "related party" is any party related to the reporting corporation within the meaning of section 267(b) or section 707(b)(1). The term includes any other related person who is defined in section 482.

**New Use for Form 5472.**—The Tax Reform Act of 1986 revised Code section 6038A to require that a foreign controlled U.S. corporation and a foreign controlled foreign corporation engaged in a U.S. trade or business report transactions with all foreign related parties.**Who Must File****(1) Domestic or Foreign Corporations.**—Domestic corporations or foreign

corporations that are engaged in a trade or business in the United States and that are "controlled" by a foreign person must file Form 5472 if the corporation had any reportable transactions with a related person.

However, a corporation is not required to file Form 5472 if during the tax year:

- It had no gross income (determined without reference to losses) subject to United States taxation, other than withholding tax under section 881, or
- Its sole trade or business in the United States is banking, financing, or similar business (as defined in regulations section 1.864-4(c)(5)(i)), or

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FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/89

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STATEMENT 1 - CORPORATION OWNERSHIP INFORMATION

CORPORATION IS OWNED BY

(A) NAME BLANC-AERO INDUSTRIES  
ADDRESS  
(B) PERCENTAGE OWNED 100 PCT  
(C) COUNTRY-IF NOT U.S. FRANCE

-----

STATEMENT 2 - COST OF GOODS SOLD

OTHER COSTS

|                       |         |
|-----------------------|---------|
| INSURANCE             | 259,149 |
| SUPPLIES              | 323,857 |
| RENT                  | 142,758 |
| PAYROLL TAXES         | 177,554 |
| UTILITIES             | 68,612  |
| REPAIRS & MAINTENANCE | 59,708  |
| DEPRECIATION          | 254,372 |
|                       | -----   |

TOTAL OTHER COSTS

1,286,010

=====

FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/89

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STATEMENT 3 - DEPRECIATION COST OF GOODS SOLD/OPERATIONS

| DATE<br>ACQUIRED<br>----- | COST OR<br>BASIS<br>----- | DEPRECIATION CALCULATION<br>PRIOR YEARS<br>DEPRECIATION<br>----- | METHOD<br>----- | YRS<br>--- | PCT<br>--- | CURRENT<br>DEPRECIATION<br>----- |
|---------------------------|---------------------------|------------------------------------------------------------------|-----------------|------------|------------|----------------------------------|
| 5-YEAR MACRS PROPERTY     |                           |                                                                  |                 |            |            |                                  |
| GMC TRUCK                 |                           |                                                                  |                 |            |            |                                  |
| 07 87                     | 8,814                     | 3,554                                                            | 200DB           | 5          |            | 1,692                            |
|                           | (ALT MIN ADJUSTMENT       |                                                                  |                 | 246)       |            |                                  |
| CLARK FORKLIFT            |                           |                                                                  |                 |            |            |                                  |
| 07 87                     | 9,000                     | 3,630                                                            | 200DB           | 5          |            | 1,728                            |
|                           | (ALT MIN ADJUSTMENT       |                                                                  |                 | 251)       |            |                                  |
| OFFICE EQUIPMENT          |                           |                                                                  |                 |            |            |                                  |
| 07/01/89                  | 4,463                     |                                                                  | 200DB1/2        | 5          | 20.00      | 893                              |
|                           | (ALT MIN ADJUSTMENT       |                                                                  |                 | 415)       |            |                                  |
| 7-YEAR MACRS PROPERTY     |                           |                                                                  |                 |            |            |                                  |
| BLASTING MACHINERY        |                           |                                                                  |                 |            |            |                                  |
| 07 87                     | 10,118                    | 3,080                                                            | 200DB           | 7          |            | 1,770                            |
|                           | (ALT MIN ADJUSTMENT       |                                                                  |                 | 577)       |            |                                  |
| COLD HEAD MACHINERY       |                           |                                                                  |                 |            |            |                                  |
| 07 87                     | 42,954                    | 13,076                                                           | 200DB           | 7          |            | 7,513                            |
|                           | (ALT MIN ADJUSTMENT       |                                                                  |                 | 2,449)     |            |                                  |
| HOT HEAD MACHINERY        |                           |                                                                  |                 |            |            |                                  |
| 07 87                     | 39,894                    | 12,145                                                           | 200DB           | 7          |            | 6,977                            |
|                           | (ALT MIN ADJUSTMENT       |                                                                  |                 | 2,273)     |            |                                  |
| GRINDING MACHINERY        |                           |                                                                  |                 |            |            |                                  |
| 07 87                     | 62,571                    | 19,049                                                           | 200DB           | 7          |            | 10,944                           |
|                           | (ALT MIN ADJUSTMENT       |                                                                  |                 | 3,567)     |            |                                  |
| TRAUD MACHINERY           |                           |                                                                  |                 |            |            |                                  |
| 07 87                     | 58,346                    | 17,763                                                           | 200DB           | 7          |            | 10,205                           |
|                           | (ALT MIN ADJUSTMENT       |                                                                  |                 | 3,326)     |            |                                  |
| MARKING MACHINERY         |                           |                                                                  |                 |            |            |                                  |
| 07 87                     | 1,811                     | 552                                                              | 200DB           | 7          |            | 317                              |
|                           | (ALT MIN ADJUSTMENT       |                                                                  |                 | 103)       |            |                                  |
| POINTING MACHINERY        |                           |                                                                  |                 |            |            |                                  |
| 07 87                     | 14,444                    | 4,397                                                            | 200DB           | 7          |            | 2,526                            |
|                           | (ALT MIN ADJUSTMENT       |                                                                  |                 | 823)       |            |                                  |
| TREAD ROLL MACHINERY      |                           |                                                                  |                 |            |            |                                  |
| 07 87                     | 40,138                    | 12,220                                                           | 200DB           | 7          |            | 7,020                            |
|                           | (ALT MIN ADJUSTMENT       |                                                                  |                 | 2,288)     |            |                                  |
| FILLET ROLL MACHINERY     |                           |                                                                  |                 |            |            |                                  |
| 07 87                     | 16,117                    | 4,907                                                            | 200DB           | 7          |            | 2,819                            |
|                           | (ALT MIN ADJUSTMENT       |                                                                  |                 | 919)       |            |                                  |
| LATHE MACHINERY           |                           |                                                                  |                 |            |            |                                  |
| 07 87                     | 20,644                    | 6,209                                                            | 200DB           | 7          |            | 3,689                            |
|                           | (ALT MIN ADJUSTMENT       |                                                                  |                 | 1,148)     |            |                                  |
| WASH MACHINERY            |                           |                                                                  |                 |            |            |                                  |
| 07 87                     | 5,747                     | 1,749                                                            | 200DB           | 7          |            | 1,005                            |
|                           | (ALT MIN ADJUSTMENT       |                                                                  |                 | 327)       |            |                                  |

FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/89 PAGE 3  
STATEMENT 3 - DEPRECIATION COST OF GOODS SOLD/OPERATIONS (CONTINUED)

| DATE<br>ACQUIRED                 | COST OR<br>BASIS              | PRIOR YEARS<br>DEPRECIATION | METHOD   | YRS | PCT   | CURRENT<br>DEPRECIATION |
|----------------------------------|-------------------------------|-----------------------------|----------|-----|-------|-------------------------|
| TRIM MACHINERY<br>07 87          | 22,053<br>(ALT MIN ADJUSTMENT | 6,714                       | 200DB    | 7   |       | 3,857                   |
|                                  |                               |                             | 1,257)   |     |       |                         |
| SHIPPING MACHINERY<br>07 87      | 722<br>(ALT MIN ADJUSTMENT    | 220                         | 200DB    | 7   |       | 126                     |
|                                  |                               |                             | 41)      |     |       |                         |
| LAB MACHINERY<br>07 87           | 21,409<br>(ALT MIN ADJUSTMENT | 6,518                       | 200DB    | 7   |       | 3,744                   |
|                                  |                               |                             | 1,220)   |     |       |                         |
| INSPECTION MACHINERY<br>07 87    | 14,757<br>(ALT MIN ADJUSTMENT | 4,493                       | 200DB    | 7   |       | 2,581                   |
|                                  |                               |                             | 841)     |     |       |                         |
| MAINTENANCE MACHINERY<br>07 87   | 11,980<br>(ALT MIN ADJUSTMENT | 3,647                       | 200DB    | 7   |       | 2,095                   |
|                                  |                               |                             | 683)     |     |       |                         |
| TOOLING MACHINERY<br>07 87       | 11,052<br>(ALT MIN ADJUSTMENT | 3,365                       | 200DB    | 7   |       | 1,933                   |
|                                  |                               |                             | 630)     |     |       |                         |
| GENERAL PLANT MACHINERY<br>07 87 | 24,166<br>(ALT MIN ADJUSTMENT | 7,357                       | 200DB    | 7   |       | 4,227                   |
|                                  |                               |                             | 1,378)   |     |       |                         |
| BLASTING MACHINERY<br>07/01/88   | 783<br>(ALT MIN ADJUSTMENT    | 112                         | 200DB1/2 | 7   | 24.49 | 192                     |
|                                  |                               |                             | 83)      |     |       |                         |
| DRILLING MACHINERY<br>07/01/88   | 17,430<br>(ALT MIN ADJUSTMENT | 2,491                       | 200DB1/2 | 7   | 24.49 | 4,269                   |
|                                  |                               |                             | 1,850)   |     |       |                         |
| HOT HEAD MACHINERY<br>07/01/88   | 35,773<br>(ALT MIN ADJUSTMENT | 5,112                       | 200DB1/2 | 7   | 24.49 | 8,761                   |
|                                  |                               |                             | 3,796)   |     |       |                         |
| GRINDING MACHINERY<br>07/01/88   | 76,707<br>(ALT MIN ADJUSTMENT | 10,961                      | 200DB1/2 | 7   | 24.49 | 18,786                  |
|                                  |                               |                             | 8,139)   |     |       |                         |
| TRAUB MACHINERY<br>07/01/88      | 3,314<br>(ALT MIN ADJUSTMENT  | 474                         | 200DB1/2 | 7   | 24.49 | 812                     |
|                                  |                               |                             | 352)     |     |       |                         |
| MARKETING MACHINERY<br>07/01/88  | 5,742<br>(ALT MIN ADJUSTMENT  | 821                         | 200DB1/2 | 7   | 24.49 | 1,406                   |
|                                  |                               |                             | 609)     |     |       |                         |
| POINTING MACHINERY<br>07/01/88   | 7,774<br>(ALT MIN ADJUSTMENT  | 1,111                       | 200DB1/2 | 7   | 24.49 | 1,904                   |
|                                  |                               |                             | 825)     |     |       |                         |
| THREADROLL MACHINERY<br>07/01/88 | 38,189<br>(ALT MIN ADJUSTMENT | 5,457                       | 200DB1/2 | 7   | 24.49 | 9,352                   |
|                                  |                               |                             | 4,051)   |     |       |                         |

FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/89

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STATEMENT 3 - DEPRECIATION COST OF GOODS SOLD/OPERATIONS (CONTINUED)

| DATE<br>ACQUIRED<br>----- | COST OR<br>BASIS<br>----- | PRIOR YEARS<br>DEPRECIATION<br>----- | METHOD<br>----- | YRS<br>--- | PCT<br>--- | CURRENT<br>DEPRECIATION<br>----- |
|---------------------------|---------------------------|--------------------------------------|-----------------|------------|------------|----------------------------------|
| LATHE MACHINERY           |                           |                                      |                 |            |            |                                  |
| 07/01/88                  | 96,810                    | 13,834                               | 200DB1/2        | 7          | 24.49      | 23,709                           |
|                           | (ALT MIN ADJUSTMENT       |                                      | 10,272)         |            |            |                                  |
| WASHING MACHINERY         |                           |                                      |                 |            |            |                                  |
| 07/01/88                  | 479                       | 68                                   | 200DB1/2        | 7          | 24.49      | 117                              |
|                           | (ALT MIN ADJUSTMENT       |                                      | 51)             |            |            |                                  |
| TRIMMING MACHINERY        |                           |                                      |                 |            |            |                                  |
| 07/01/88                  | 10,785                    | 1,541                                | 200DB1/2        | 7          | 24.49      | 2,641                            |
|                           | (ALT MIN ADJUSTMENT       |                                      | 1,144)          |            |            |                                  |
| SHIPPING MACHINERY        |                           |                                      |                 |            |            |                                  |
| 07/01/88                  | 5,857                     | 837                                  | 200DB1/2        | 7          | 24.49      | 1,434                            |
|                           | (ALT MIN ADJUSTMENT       |                                      | 621)            |            |            |                                  |
| INSPECTION MACHINERY      |                           |                                      |                 |            |            |                                  |
| 07/01/88                  | 1,524                     | 218                                  | 200DB1/2        | 7          | 24.49      | 373                              |
|                           | (ALT MIN ADJUSTMENT       |                                      | 161)            |            |            |                                  |
| MAINTENANCE MACHINERY     |                           |                                      |                 |            |            |                                  |
| 07/01/88                  | 1,716                     | 245                                  | 200DB1/2        | 7          | 24.49      | 420                              |
|                           | (ALT MIN ADJUSTMENT       |                                      | 182)            |            |            |                                  |
| TOOLING MACHINERY         |                           |                                      |                 |            |            |                                  |
| 07/01/88                  | 99,426                    | 14,208                               | 200DB1/2        | 7          | 24.49      | 24,349                           |
|                           | (ALT MIN ADJUSTMENT       |                                      | 10,549)         |            |            |                                  |
| GENERAL PLANT & MACHINERY |                           |                                      |                 |            |            |                                  |
| 07/01/88                  | 4,433                     | 633                                  | 200DB1/2        | 7          | 24.49      | 1,086                            |
|                           | (ALT MIN ADJUSTMENT       |                                      | 471)            |            |            |                                  |
| MARKING MACHINERY         |                           |                                      |                 |            |            |                                  |
| 07/01/89                  | 6,109                     |                                      | 200DB1/2        | 7          | 14.29      | 873                              |
|                           | (ALT MIN ADJUSTMENT       |                                      | 415)            |            |            |                                  |
| THREADROLL MACHINERY      |                           |                                      |                 |            |            |                                  |
| 07/01/89                  | 38,211                    |                                      | 200DB           | 7          |            | 4,031                            |
|                           | (ALT MIN ADJUSTMENT       |                                      | 1,915)          |            |            |                                  |
|                           |                           | SEC 179 COST EXPENSED                |                 |            |            | 10,000                           |
| FILLETROLL MACHINERY      |                           |                                      |                 |            |            |                                  |
| 07/01/89                  | 10,229                    |                                      | 200DB1/2        | 7          | 14.29      | 1,462                            |
|                           | (ALT MIN ADJUSTMENT       |                                      | 695)            |            |            |                                  |
| TOOLING MACHINERY         |                           |                                      |                 |            |            |                                  |
| 07/01/89                  | 38,285                    |                                      | 200DB1/2        | 7          | 14.29      | 5,471                            |
|                           | (ALT MIN ADJUSTMENT       |                                      | 2,600)          |            |            |                                  |
| GRINDING MACHINERY        |                           |                                      |                 |            |            |                                  |
| 07/01/89                  | 96,292                    |                                      | 200DB1/2        | 7          | 14.29      | 13,760                           |
|                           | (ALT MIN ADJUSTMENT       |                                      | 6,538)          |            |            |                                  |
| TRAUB MACHINERY           |                           |                                      |                 |            |            |                                  |
| 07/01/89                  | 1,000                     |                                      | 200DB1/2        | 7          | 14.29      | 143                              |
|                           | (ALT MIN ADJUSTMENT       |                                      | 68)             |            |            |                                  |

FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/89

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STATEMENT 3 - DEPRECIATION COST OF GOODS SOLD/OPERATIONS (CONTINUED)

| DATE<br>ACQUIRED<br>-----      | DEPRECIATION CALCULATION  |                                      |                 |            |            | CURRENT<br>DEPRECIATION<br>----- |
|--------------------------------|---------------------------|--------------------------------------|-----------------|------------|------------|----------------------------------|
|                                | COST OR<br>BASIS<br>----- | PRIOR YEARS<br>DEPRECIATION<br>----- | METHOD<br>----- | YRS<br>--- | PCT<br>--- |                                  |
| LATHE MACHINERY                |                           |                                      |                 |            |            |                                  |
| 07/01/89                       | 109,009                   |                                      | 200DB1/2        | 7          | 14.29      | 15,577                           |
|                                | (ALT MIN ADJUSTMENT       |                                      | 7,401)          |            |            |                                  |
| INSPECTION MACHINERY           |                           |                                      |                 |            |            |                                  |
| 07/01/89                       | 74,192                    |                                      | 200DB1/2        | 7          | 14.29      | 10,602                           |
|                                | (ALT MIN ADJUSTMENT       |                                      | 5,038)          |            |            |                                  |
| TRIM MACHINERY                 |                           |                                      |                 |            |            |                                  |
| 07/01/89                       | 550                       |                                      | 200DB1/2        | 7          | 14.29      | 79                               |
|                                | (ALT MIN ADJUSTMENT       |                                      | 38)             |            |            |                                  |
| GENERAL PLANT MACHINERY        |                           |                                      |                 |            |            |                                  |
| 07/01/89                       | 18,198                    |                                      | 200DB1/2        | 7          | 14.29      | 2,600                            |
|                                | (ALT MIN ADJUSTMENT       |                                      | 1,235)          |            |            |                                  |
| BLASTING MACHINERY             |                           |                                      |                 |            |            |                                  |
| 07/01/89                       | 15,450                    |                                      | 200DB1/2        | 7          | 14.29      | 2,208                            |
|                                | (ALT MIN ADJUSTMENT       |                                      | 1,049)          |            |            |                                  |
| DRILLING MACHINERY             |                           |                                      |                 |            |            |                                  |
| 07/01/89                       | 39,667                    |                                      | 200DB1/2        | 7          | 14.29      | 5,668                            |
|                                | (ALT MIN ADJUSTMENT       |                                      | 2,693)          |            |            |                                  |
| COLD HEADING MACHINERY         |                           |                                      |                 |            |            |                                  |
| 07/01/89                       | 1,635                     |                                      | 200DB1/2        | 7          | 14.29      | 234                              |
|                                | (ALT MIN ADJUSTMENT       |                                      | 111)            |            |            |                                  |
| HOT HEADING MACHINERY          |                           |                                      |                 |            |            |                                  |
| 07/01/89                       | 18,562                    |                                      | 200DB1/2        | 7          | 14.29      | 2,653                            |
|                                | (ALT MIN ADJUSTMENT       |                                      | 1,261)          |            |            |                                  |
| NONRESIDENTIAL REAL PROPERTY   |                           |                                      |                 |            |            |                                  |
| LEASEHOLD IMPROVEMENTS         |                           |                                      |                 |            |            |                                  |
| 07 87                          | 27,882                    | 1,291                                | SL              | 31.5       |            | 885                              |
|                                | (ALT MIN ADJUSTMENT       |                                      | 188)            |            |            |                                  |
| LEASEHOLD IMPROVEMENTS         |                           |                                      |                 |            |            |                                  |
| 07/01/88                       | 5,200                     | 76                                   | SL 1/12         | 31.5       | 3.17       | 165                              |
|                                | (ALT MIN ADJUSTMENT       |                                      | 35)             |            |            |                                  |
| LEASEHOLD IMPROVEMENTS         |                           |                                      |                 |            |            |                                  |
| 07/01/89                       | 47,323                    |                                      | SL 1/12         | 31.5       | 1.45       | 689                              |
|                                | (ALT MIN ADJUSTMENT       |                                      | 147)            |            |            |                                  |
| -----                          |                           |                                      |                 |            |            | -----                            |
| TOTAL ALT MIN TAX ADJUSTMENTS  |                           |                                      |                 |            |            | 99,345                           |
| TOTAL FIRST YEAR EXPENSED COST |                           |                                      |                 |            |            | 10,000                           |

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STATEMENT 3 - DEPRECIATION COST OF GOODS SOLD/OPERATIONS (CONTINUED)

| DATE<br>ACQUIRED<br>----- | COST OR<br>BASIS<br>----- | PRIOR YEARS<br>DEPRECIATION<br>----- | METHOD<br>----- | YRS<br>--- | PCT<br>--- | CURRENT<br>DEPRECIATION<br>----- |
|---------------------------|---------------------------|--------------------------------------|-----------------|------------|------------|----------------------------------|
| TOT 5YR MACRS             | 22,277                    | 7,184                                |                 |            |            | 4,313                            |
| TOT 7YR MACRS             | 1,293,054                 | 185,584                              |                 |            |            | 238,320                          |
| TOT NONRES RL             | 80,405                    | 1,367                                |                 |            |            | 1,739                            |
|                           | -----                     | -----                                |                 |            |            | -----                            |
| TOTALS                    | 1,395,736                 | 194,135                              |                 |            |            | 254,372                          |
|                           | =====                     | =====                                |                 |            |            | =====                            |

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STATEMENT 4 - OTHER INCOME

|                         |       |
|-------------------------|-------|
| INCOME FROM SCRAP SALES | 1,623 |
| MISC INCOME             | 131   |
|                         | ----- |

|                    |       |
|--------------------|-------|
| TOTAL OTHER INCOME | 1,754 |
|                    | ===== |

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STATEMENT 5 - TAXES

|                    |        |
|--------------------|--------|
| STATE INCOME TAXES | 300    |
| PAYROLL TAXES      | 19,728 |
| PROPERTY TAXES     | 11,387 |
|                    | -----  |

|             |        |
|-------------|--------|
| TOTAL TAXES | 31,415 |
|             | =====  |

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STATEMENT 6 - OTHER DEDUCTIONS

|                                   |         |
|-----------------------------------|---------|
| ALLOWABLE MEALS AND ENTERTAINMENT | 3,284   |
| PROFESSIONAL FEES                 | 54,900  |
| INTERCOMPANY EXPENSES             | 26,914  |
| LICENSE & PERMITS                 | 1,803   |
| AUTO EXPENSE                      | 6,431   |
| DUES & SUBSCRIPTIONS              | 3,958   |
| POSTAGE                           | 2,935   |
| OFFICE EXPENSE                    | 66,009  |
| TELEPHONE & TELEX                 | 37,275  |
| INSURANCE                         | 33,791  |
| UTILITIES                         | 22,870  |
| COMMISSIONS                       | 24,198  |
| TRAVEL                            | 14,553  |
| SEC. 263(A) INVENTORY ADJ.        | -77,704 |
| DELIVERY EXPENSE                  | 11,266  |
| HAZARDOUS WASTE                   | 19,434  |
| MISCELLANEOUS                     | 310     |
| WATER'S EDGE FEE                  | 900     |

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TOTAL OTHER DEDUCTIONS

253,127

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STATEMENT 7 - DEPRECIATION

| DATE<br>ACQUIRED<br>-----     | COST OR<br>BASIS<br>----- | PRIOR YEARS<br>DEPRECIATION<br>----- | METHOD<br>----- | YRS<br>--- | PCT<br>--- | CURRENT<br>DEPRECIATION<br>----- |
|-------------------------------|---------------------------|--------------------------------------|-----------------|------------|------------|----------------------------------|
| 5-YEAR MACRS PROPERTY         |                           |                                      |                 |            |            |                                  |
| OFFICE EQUIPMENT              |                           |                                      |                 |            |            |                                  |
| 07/23/87                      | 11,259                    | 4,541                                | 200DB           | 5          |            | 2,162                            |
|                               | (ALT MIN ADJUSTMENT       |                                      |                 | 314)       |            |                                  |
| OFFICE EQUIPMENT              |                           |                                      |                 |            |            |                                  |
| 07/01/88                      | 58,546                    | 11,709                               | 200DB1/2        | 5          | 32.00      | 18,735                           |
|                               | (ALT MIN ADJUSTMENT       |                                      |                 | 5,925)     |            |                                  |
| FORD TEMPO                    |                           |                                      |                 |            |            |                                  |
| 07/01/88                      | 11,550                    | 2,310                                | 200DB           | 5          |            | 1,848                            |
|                               | (ALT MIN ADJUSTMENT       |                                      |                 | -1,097)    |            |                                  |
| OFFICE FURNITURE              |                           |                                      |                 |            |            |                                  |
| 07/01/89                      | 16,221                    |                                      | 200DB1/2        | 5          | 20.00      | 3,244                            |
|                               | (ALT MIN ADJUSTMENT       |                                      |                 | 1,507)     |            |                                  |
| LUXURY AUTO MACRS             |                           |                                      |                 |            |            |                                  |
| 1987 CHEVROLET                |                           |                                      |                 |            |            |                                  |
| # 07/23/87                    | 13,373                    | 5,167                                | 200DB           | 5          |            | 2,450                            |
|                               | (ALT MIN ADJUSTMENT       |                                      |                 | 63)        |            |                                  |
| 7-YEAR MACRS PROPERTY         |                           |                                      |                 |            |            |                                  |
| OFFICE FURNITURE              |                           |                                      |                 |            |            |                                  |
| 07/23/87                      | 9,431                     | 2,872                                | 200DB           | 7          |            | 1,649                            |
|                               | (ALT MIN ADJUSTMENT       |                                      |                 | 537)       |            |                                  |
| OFFICE FURNITURE              |                           |                                      |                 |            |            |                                  |
| 07/01/88                      | 2,654                     | 379                                  | 200DB1/2        | 7          | 24.49      | 650                              |
|                               | (ALT MIN ADJUSTMENT       |                                      |                 | 282)       |            |                                  |
| NONRESIDENTIAL REAL PROPERTY  |                           |                                      |                 |            |            |                                  |
| LEASEHOLD IMPROVEMENTS        |                           |                                      |                 |            |            |                                  |
| 07/23/87                      | 36,495                    | 1,690                                | SL              | 31.5       |            | 1,159                            |
|                               | (ALT MIN ADJUSTMENT       |                                      |                 | 247)       |            |                                  |
| LEASEHOLD IMPROVEMENTS        |                           |                                      |                 |            |            |                                  |
| 07/01/88                      | 6,749                     | 98                                   | SL 1/12         | 31.5       | 3.17       | 214                              |
|                               | (ALT MIN ADJUSTMENT       |                                      |                 | 45)        |            |                                  |
| LEASEHOLD IMPROVEMENTS        |                           |                                      |                 |            |            |                                  |
| 07/01/89                      | 5,054                     |                                      | SL 1/12         | 31.5       | 1.45       | 74                               |
|                               | (ALT MIN ADJUSTMENT       |                                      |                 | 16)        |            |                                  |
| TOTAL ALT MIN TAX ADJUSTMENTS |                           |                                      |                 |            |            | 7,839                            |
| TOT 5YR MACRS                 | 97,576                    | 18,560                               |                 |            |            | 25,989                           |

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MERCURY AEROSPACE, INC.

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FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/89

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STATEMENT 7 - DEPRECIATION (CONTINUED)

| DATE<br>ACQUIRED    | COST OR<br>BASIS | PRIOR YEARS<br>DEPRECIATION | METHOD | YRS | PCT | CURRENT<br>DEPRECIATION |
|---------------------|------------------|-----------------------------|--------|-----|-----|-------------------------|
| TOT AUTO MACRS      | 13,373           | 5,167                       |        |     |     | 2,450                   |
| TOT 7YR MACRS       | 12,085           | 3,251                       |        |     |     | 2,299                   |
| TOT NONRES RL       | 48,298           | 1,788                       |        |     |     | 1,447                   |
| TOTALS              | 171,332          | 28,766                      |        |     |     | 32,185                  |
| # - LISTED PROPERTY |                  |                             |        |     |     |                         |

STATEMENT 8 - NET OPERATING LOSS DEDUCTION

| YEAR                     | LOSS SUSTAINED | AMOUNT APPLIED<br>IN PRIOR YEARS | AMOUNT AVAILABLE<br>FOR CARRYOVER |
|--------------------------|----------------|----------------------------------|-----------------------------------|
| 1987                     | 48,304         |                                  | 48,304                            |
| 1988                     | 42,185         |                                  | 42,185                            |
| TOTAL NET OPERATING LOSS |                |                                  | 90,489                            |

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FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/89

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STATEMENT 9 - FEDERAL TAX CALCULATION

REGULAR TAX CALCULATION

|                                                                                                                                                          |         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| 1. TAXABLE INCOME                                                                                                                                        | 411,121 |
| 2. ENTER THE LESSER OF LINE 1, \$50,000, OR<br>ALLOCATED AMOUNT IF MEMBER OF A CONTROLLED GROUP                                                          | 50,000  |
| 3. SUBTRACT LINE 2 FROM LINE 1                                                                                                                           | 361,121 |
| 4. ENTER THE LESSER OF LINE 3, \$25,000, OR<br>ALLOCATED AMOUNT IF MEMBER OF A CONTROLLED GROUP                                                          | 25,000  |
| 5. SUBTRACT LINE 4 FROM LINE 3                                                                                                                           | 336,121 |
| 6. IF LINE 1 IS OVER \$100,000 ENTER THE EXCESS<br>HERE, DO NOT ENTER MORE THAN \$235,000, MEMBERS OF<br>CONTROLLED GROUP ENTER ALLOCATED TAX ON LINE 10 | 235,000 |
| 7. 15 PERCENT OF LINE 2                                                                                                                                  | 7,500   |
| 8. 25 PERCENT OF LINE 4                                                                                                                                  | 6,250   |
| 9. 34 PERCENT OF LINE 5                                                                                                                                  | 114,281 |
| 10. LESSER OF 5% OF LINE 6 OR \$11,750, MEMBERS OF<br>CONTROLLED GROUP ENTER ALLOCATED SHARE TAX HERE                                                    | 11,750  |
| 11. REGULAR TAX - TOTAL OF LINES 7 THROUGH 10.                                                                                                           | 139,781 |

STATEMENT 10 - OTHER CURRENT ASSETS

|                            | BEGINNING OF<br>TAXABLE YEAR | END OF<br>TAXABLE YEAR |
|----------------------------|------------------------------|------------------------|
| DEPOSITS                   | 20,613                       | 54,139                 |
| PREPAID EXPENSES           | 11,501                       | 0                      |
| DEFERRED INCOME TAXES      | 0                            | 71,500                 |
| TOTAL OTHER CURRENT ASSETS | 32,114                       | 125,639                |

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MERCURY AEROSPACE, INC.

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FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/89

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STATEMENT 11 - OTHER ASSETS

|                           | BEGINNING OF<br>TAXABLE YEAR | END OF<br>TAXABLE YEAR |
|---------------------------|------------------------------|------------------------|
| ADVANCES TO RELATED PARTY | 0                            | 161,111                |
|                           | -----                        | -----                  |
| TOTAL OTHER ASSETS        | 0                            | 161,111                |
|                           | =====                        | =====                  |

STATEMENT 12 - OTHER CURRENT LIABILITIES

|                                 | BEGINNING OF<br>TAXABLE YEAR | END OF<br>TAXABLE YEAR |
|---------------------------------|------------------------------|------------------------|
| ACCRUED FEDERAL INCOME TAX      |                              | 65,000                 |
| ACCRUED STATE TAX               |                              | 21,400                 |
| PAYROLL TAXES PAYABLE           | 237                          | 0                      |
| ACCRUED PAYROLL                 | 74,561                       | 100,070                |
| OTHER ACCRUED EXPENSES          | 0                            | 11,628                 |
| ACCRUED INSURANCE               | 0                            | 16,927                 |
|                                 | -----                        | -----                  |
| TOTAL OTHER CURRENT LIABILITIES | 74,798                       | 215,025                |
|                                 | =====                        | =====                  |

STATEMENT 13 - OTHER LIABILITIES

|                         | BEGINNING OF<br>TAXABLE YEAR | END OF<br>TAXABLE YEAR |
|-------------------------|------------------------------|------------------------|
| INTERCOMPANY LOAN       | 1,311,719                    | 1,661,038              |
|                         | -----                        | -----                  |
| TOTAL OTHER LIABILITIES | 1,311,719                    | 1,661,038              |
|                         | =====                        | =====                  |

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MERCURY AEROSPACE, INC.

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FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/89

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STATEMENT 14 - ALTERNATIVE TAX NET OPERATING LOSS DEDUCTION

| YEAR | LOSS SUSTAINED | AMOUNT APPLIED<br>IN PRIOR YEARS | AMOUNT AVAILABLE<br>FOR CARRYOVER |
|------|----------------|----------------------------------|-----------------------------------|
| 1987 | 48,304         | 44,981                           | 3,323                             |
| 1988 | 42,185         |                                  | 42,185                            |

TOTAL ALTERNATIVE TAX NET OPERATING LOSS

45,508

ALTERNATIVE TAX NOL- LIMITED TO 90% OF  
ALTERNATIVE MINIMUM TAXABLE INCOME BEFORE NOL

45,508

STATEMENT 15 - COMPUTATION OF ADJUSTED NET BOOK INCOME FOR  
ALTERNATIVE MINIMUM TAX PURPOSES

|                                                  |         |
|--------------------------------------------------|---------|
| 1. NET BOOK INCOME                               | 345,205 |
| 2. INCOME TAXES                                  |         |
| (A) FEDERAL INCOME TAXES                         | 195,500 |
| (B) FOREIGN COUNTRY OR U.S. POSSESSIONS TAXES    | 0       |
| 3. ADJUSTMENTS FOR BOOK AND TAX YEAR DIFFERENCES | 0       |
| 4. POSSESSION CORPORATION DIVIDENDS              | 0       |
| 5. OTHER ADJUSTMENTS                             | 0       |
| 6. CONSOLIDATED ADJUSTMENTS                      | 0       |

7. ADJUSTED NET BOOK INCOME (ADD LINES 1 THRU 5)

540,705

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MERCURY AEROSPACE, INC.

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FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/89

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STATEMENT 16 - TAXABLE INCOME NOT RECORDED  
ON BOOKS THIS YEAR

INCOME FROM DISPOSITION OF ASSETS

-2,869

TOTAL TAXABLE INCOME NOT ON BOOKS

-2,869

STATEMENT 17 - OTHER EXPENSES RECORDED ON BOOKS  
NOT DEDUCTED IN THIS RETURN

ADDITIONS FOR BAD DEBTS

25,551

COSTS CAPITALIZED-SEC 263A -1989

43,514

SALES TAX ACCRUAL

35,494

ACCRUED VACATION-CURRENT YEAR

7,006

FRANCHISE TAX

300

TOTAL OTHER EXPENSES ON BOOKS NOT ON RETURN

111,865

STATEMENT 18 - OTHER INCOME RECORDED ON BOOKS  
NOT INCLUDED IN THIS RETURN

FEDERAL INCOME TAX BENEFIT OF NOL

62,000

INCOME FROM DISPOSITON OF ASSETS

-188

TOTAL OTHER INCOME ON BOOKS NOT ON RETURN

61,812

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MERCURY AEROSPACE, INC.

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FEDERAL CORPORATION STATEMENTS - YEAR ENDING 12/31/89

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STATEMENT 19 - OTHER DEDUCTIONS IN THIS TAX RETURN  
NOT CHARGED AGAINST BOOK INCOME

|                                 |        |
|---------------------------------|--------|
| ADDITIONS FOR BAD DEBTS         | 20,551 |
| COSTS CAPITALIZED-SEC 263A-1988 | 12,079 |
| ACCRUED VACATION-PRIOR YEAR     | 55,000 |
| CALIFORNIA-WATERS EDGE FEE      | 900    |
|                                 | -----  |

TOTAL OTHER DEDUCTIONS ON RETURN NOT ON BOOKS

88,530  
=====

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MERCURY AEROSPACE INC.  
(a wholly-owned subsidiary of Blanc-Aero Industries)

REVIEWED FINANCIAL STATEMENTS  
AND SUPPLEMENTAL MATERIAL

JULY 23, 1987 (INCEPTION) TO DECEMBER 31, 1987

Seidman  
&  
Seidman | BIO

10.357

MERCURY AEROSPACE INC.  
(a wholly-owned subsidiary of Blanc-Aero Industries)

REVIEWED FINANCIAL STATEMENTS  
AND SUPPLEMENTAL MATERIAL

JULY 23, 1987 (INCEPTION) TO DECEMBER 31, 1987

MERCURY AEROSPACE INC.

BALANCE SHEET  
DECEMBER 31, 1987

---

ASSETS

CURRENT ASSETS:

|                                                                        |                |
|------------------------------------------------------------------------|----------------|
| Cash                                                                   | \$ 65 429      |
| Accounts receivable, less allowance<br>of \$25,000 for possible losses | 358 158        |
| Inventories (Note 2)                                                   | <u>868 318</u> |

|                      |           |
|----------------------|-----------|
| TOTAL CURRENT ASSETS | 1 291 905 |
|----------------------|-----------|

|                                                                   |         |
|-------------------------------------------------------------------|---------|
| PROPERTY AND EQUIPMENT, less<br>accumulated depreciation (Note 3) | 486 083 |
|-------------------------------------------------------------------|---------|

|          |               |
|----------|---------------|
| DEPOSITS | <u>15 000</u> |
|----------|---------------|

\$1 792 988

LIABILITIES AND STOCKHOLDERS' EQUITY

CURRENT LIABILITIES:

|                  |               |
|------------------|---------------|
| Accounts payable | \$ 157 423    |
| Accrued expenses | <u>54 222</u> |

|                           |         |
|---------------------------|---------|
| TOTAL CURRENT LIABILITIES | 211 645 |
|---------------------------|---------|

|                         |                |
|-------------------------|----------------|
| LONG-TERM DEBT (Note 4) | <u>483 500</u> |
|-------------------------|----------------|

|                   |         |
|-------------------|---------|
| TOTAL LIABILITIES | 695 145 |
|-------------------|---------|

COMMITMENTS (Note 6)

STOCKHOLDERS' EQUITY:

|                                                                                      |                  |
|--------------------------------------------------------------------------------------|------------------|
| Common stock, \$1 par value; 100,000<br>shares authorized; issued and<br>outstanding | 100 000          |
| Paid in capital                                                                      | 1 100 000        |
| Deficit                                                                              | <u>(102 157)</u> |

|                            |                  |
|----------------------------|------------------|
| TOTAL STOCKHOLDERS' EQUITY | <u>1 097 843</u> |
|----------------------------|------------------|

\$1 792 988

See accompanying accountants' review  
report and notes to financial statements.

MERCURY AEROSPACE INC.

STATEMENTS OF LOSS  
JULY 23, 1987 (INCEPTION) TO DECEMBER 31, 1987

---

|                            | <u>Amount</u>       | <u>% of sales</u> |
|----------------------------|---------------------|-------------------|
| NET SALES                  | \$ 794 474          | 100.0%            |
| COST OF GOODS SOLD         | <u>605 503</u>      | <u>76.2</u>       |
| Gross profit               | 188 971             | 23.8              |
| OPERATING EXPENSES:        |                     |                   |
| Selling                    | 44 847              | 5.6               |
| General and administrative | <u>251 484</u>      | <u>31.7</u>       |
|                            | <u>296 331</u>      | <u>37.3</u>       |
| Operating loss             | (107 360)           | (13.5)            |
| OTHER INCOME               | <u>5 203</u>        | <u>.7</u>         |
| NET LOSS                   | \$ <u>(102 157)</u> | <u>(12.8) %</u>   |

See accompanying accountants' review  
report and notes to financial statements.

MERCURY AEROSPACE INC.

STATEMENT OF CHANGES IN FINANCIAL POSITION  
JULY 23, 1987 (INCEPTION) TO DECEMBER 31, 1987

---

|                                                                          |                    |
|--------------------------------------------------------------------------|--------------------|
| USE OF WORKING CAPITAL:                                                  |                    |
| Net loss                                                                 | \$ 102 157         |
| Depreciation and amortization not<br>requiring outlay of working capital | <u>(50 003)</u>    |
| Total absorbed by operations                                             | 52 154             |
| Additions to property and equipment                                      | 536 086            |
| Deposits                                                                 | <u>15 000</u>      |
| Total                                                                    | <u>603 240</u>     |
| SOURCE OF WORKING CAPITAL:                                               |                    |
| Advances from parent                                                     | 483 500            |
| Sale of stock                                                            | <u>1 200 000</u>   |
| Total                                                                    | <u>1 683 500</u>   |
| INCREASE IN WORKING CAPITAL                                              | <u>\$1 080 260</u> |
| CHANGES IN WORKING CAPITAL ITEMS:                                        |                    |
| Increase in current assets:                                              |                    |
| Cash                                                                     | \$ 65 429          |
| Accounts receivable                                                      | 358 158            |
| Inventories                                                              | <u>868 318</u>     |
| Total                                                                    | <u>1 291 905</u>   |
| Increase in current liabilities:                                         |                    |
| Accounts payable                                                         | 157 423            |
| Accrued expenses                                                         | <u>54 222</u>      |
| Total                                                                    | <u>211 645</u>     |
| INCREASE IN WORKING CAPITAL                                              | <u>\$1 080 260</u> |

See accompanying accountants' review  
report and notes to financial statements.

MERCURY AEROSPACE INC.

NOTES TO FINANCIAL STATEMENTS

NOTE 1 - SUMMARY OF ACCOUNTING POLICIES

Business

On July 23, 1987, Blanc-Aero Industries (a French Company) acquired the assets and assumed the liabilities of Microdot Inc.'s Mercury Aerospace Division through a newly formed company, Mercury Aerospace Inc. (a wholly-owned subsidiary of Blanc-Aero Industries). Mercury Aerospace Inc. is in the business of making and selling fasteners to the aircraft industries.

Inventories

Inventories are valued at the lower of cost or market. Cost is determined by the first-in, first-out method.

Property, equipment and depreciation

Property and equipment are stated at cost. Depreciation is computed using the straight-line method over the estimated useful lives of the assets. Amortization of leasehold improvements is computed using the straight-line method over the life of the lease.

NOTE 2 - INVENTORIES

Inventories are summarized as follows:

|                 |                  |
|-----------------|------------------|
| Raw materials   | \$317 128        |
| Work in process | 436 190          |
| Finished goods  | <u>115 000</u>   |
|                 | <u>\$868 318</u> |

NOTE 3 - PROPERTY AND EQUIPMENT

Major classes of property and equipment consist of the following:

|                                                   |                  | <u>Estimated<br/>useful lives</u> |
|---------------------------------------------------|------------------|-----------------------------------|
| Machinery and equipment                           | \$419 831        | 5 years                           |
| Office equipment                                  | 20 691           | 3-5 years                         |
| Transportation equipment                          | 31 187           | 3 years                           |
| Leasehold improvements                            | <u>64 377</u>    | 3 years                           |
|                                                   | 536 086          |                                   |
| Less accumulated depreciation<br>and amortization | <u>50 003</u>    |                                   |
| Net property and equipment                        | <u>\$486 083</u> |                                   |

See accompanying accountants' review report.

MERCURY AEROSPACE INC.

NOTES TO FINANCIAL STATEMENTS  
(Concluded)

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NOTE 4 - RELATED PARTY TRANSACTIONS

The Company has a non-interest bearing note payable to Blanc-Aero Industries which represents advances to the Company amounting to \$483,500.

NOTE 5 - INCOME TAXES

The Company will file federal and California income tax returns. At December 31, 1987, the Company has a net operating loss carryforward available to offset future taxable income of approximately \$102,000 that expires in the year 2002.

NOTE 6 - COMMITMENTS

The company leases its premises under an operating lease expiring in 1991. Future minimum rental payments are as follows:

|      |                  |
|------|------------------|
| 1988 | \$190 344        |
| 1989 | 190 344          |
| 1990 | 190 344          |
| 1991 | <u>190 344</u>   |
|      | <u>\$761 376</u> |

Rent expense for the period amounted to \$85,269.

See accompanying accountants' review report.

### SUPPLEMENTAL MATERIAL

Our review of the financial statements in the preceding section of this report was directed to an expression of limited assurances on those statements taken as a whole. The supplemental material presented in the following section is presented only for supplementary purposes and has been subjected to the inquiry and analytical procedures applied in the review of the basic financial statements. Based on our review, we did not become aware of any material modifications that should be made to the supplemental material in order for such information to be in conformity with generally accepted accounting principles when considered in relation to the financial statements taken as a whole.

*Seidman & Seidman*

Certified Public Accountants

Beverly Hills, California  
January 22, 1988

MERCURY AEROSPACE INC.

SCHEDULES OF COST OF GOODS SOLD  
JULY 23, 1987 (INCEPTION) TO DECEMBER 31, 1987

---

COST OF GOODS SOLD:

|                                      |                   |
|--------------------------------------|-------------------|
| Inventories - acquired from Microdot | \$593 361         |
| Labor                                | 340 380           |
| Sub-contractors                      | 119 645           |
| Purchases                            | 97 367            |
| Insurance                            | 78 715            |
| Supplies                             | 75 073            |
| Rent                                 | 63 952            |
| Depreciation                         | 40 371            |
| Payroll taxes                        | 35 011            |
| Utilities                            | 17 185            |
| Repairs and maintenance              | <u>12 761</u>     |
|                                      | 1 473 821         |
| Inventories - ending                 | <u>868 318</u>    |
|                                      | <u>\$ 605 503</u> |

See accompanying accountants' review  
report and notes to financial statements.

MERCURY AEROSPACE INC.  
(a wholly-owned subsidiary of Blanc-Aero Industries)

REVIEWED FINANCIAL STATEMENTS  
AND SUPPLEMENTAL MATERIAL

YEAR ENDED DECEMBER 31, 1988

Report on Reviewed Financial Statements

Mercury Aerospace Inc.  
(a wholly-owned subsidiary of Blanc-Aero Industries)  
North Hollywood, California

We have reviewed the accompanying balance sheet of Mercury Aerospace Inc. as of December 31, 1988 and the related statements of net loss and deficit and cash flows for the year then ended, in accordance with standards established by the American Institute of Certified Public Accountants. All information included in these financial statements is the representation of the management of Mercury Aerospace Inc.

A review consists principally of inquiries of company personnel and analytical procedures applied to financial data. It is substantially less in scope than an examination in accordance with generally accepted auditing standards, the objective of which is the expression of an opinion regarding the financial statements taken as a whole. Accordingly, we do not express such an opinion.

Based on our review, we are not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in conformity with generally accepted accounting principles.

*BDO Seidman*

January 23, 1989

MERCURY AEROSPACE INC.

BALANCE SHEET  
DECEMBER 31, 1988

---

ASSETS

CURRENT ASSETS:

|                                                                       |                  |
|-----------------------------------------------------------------------|------------------|
| Cash                                                                  | \$ 111 538       |
| Accounts receivable, less allowance<br>of \$6,000 for possible losses | 572 331          |
| Inventories (Note 2)                                                  | <u>1 251 815</u> |

|                      |           |
|----------------------|-----------|
| TOTAL CURRENT ASSETS | 1 935 684 |
|----------------------|-----------|

|                                                                             |         |
|-----------------------------------------------------------------------------|---------|
| PROPERTY AND EQUIPMENT, less \$225,271<br>accumulated depreciation (Note 3) | 802 167 |
|-----------------------------------------------------------------------------|---------|

|              |               |
|--------------|---------------|
| OTHER ASSETS | <u>20 613</u> |
|--------------|---------------|

\$2 758 464

LIABILITIES AND STOCKHOLDER'S EQUITY

CURRENT LIABILITIES:

|                  |               |
|------------------|---------------|
| Accounts payable | \$ 343 963    |
| Accrued expenses | <u>63 297</u> |

|                           |         |
|---------------------------|---------|
| TOTAL CURRENT LIABILITIES | 407 260 |
|---------------------------|---------|

|                                       |                  |
|---------------------------------------|------------------|
| ADVANCES FROM PARENT COMPANY (Note 4) | <u>1 311 719</u> |
|---------------------------------------|------------------|

|                   |           |
|-------------------|-----------|
| TOTAL LIABILITIES | 1 718 979 |
|-------------------|-----------|

COMMITMENTS (Note 6)

STOCKHOLDER'S EQUITY:

|                                                                                      |         |
|--------------------------------------------------------------------------------------|---------|
| Common stock, \$1 par value; 100,000<br>shares authorized; issued and<br>outstanding | 100 000 |
|--------------------------------------------------------------------------------------|---------|

|                 |           |
|-----------------|-----------|
| Paid-in-capital | 1 100 000 |
|-----------------|-----------|

|         |                  |
|---------|------------------|
| Deficit | <u>(160 515)</u> |
|---------|------------------|

|                            |                  |
|----------------------------|------------------|
| TOTAL STOCKHOLDER'S EQUITY | <u>1 039 485</u> |
|----------------------------|------------------|

\$2 758 464

See accompanying accountants' review  
report and notes to financial statements.

MERCURY AEROSPACE INC.

STATEMENT OF NET LOSS AND DEFICIT  
FOR THE YEAR ENDED DECEMBER 31, 1988

---

|                               | <u>Amount</u>       | <u>% of sales</u> |
|-------------------------------|---------------------|-------------------|
| NET SALES                     | \$3 330 761         | 100.0%            |
| COST OF GOODS SOLD            | <u>2 738 052</u>    | <u>82.2</u>       |
| Gross profit                  | 592 709             | 17.8              |
| OPERATING EXPENSES:           |                     |                   |
| Selling                       | 138 929             | 4.2               |
| General and administrative    | <u>525 531</u>      | <u>15.8</u>       |
|                               | <u>664 460</u>      | <u>20.0</u>       |
| Operating loss                | (71 751)            | (2.2)             |
| OTHER INCOME                  | <u>13 394</u>       | <u>.4</u>         |
| NET LOSS                      | (58 357)            | <u>(1.8)</u> %    |
| DEFICIT, at beginning of year | <u>(102 157)</u>    |                   |
| DEFICIT, at end of year       | <u>\$ (160 514)</u> |                   |

See accompanying accountants' review  
report and notes to financial statements.

MERCURY AEROSPACE INC.

STATEMENT OF CASH FLOWS  
FOR THE YEAR ENDED DECEMBER 31, 1988

Increase (decrease) in cash

|                                                                               |                  |
|-------------------------------------------------------------------------------|------------------|
| Cash flows from operating activities:                                         |                  |
| Net loss                                                                      | \$(58 358)       |
| Adjustments to reconcile net income to net cash used by operating activities: |                  |
| Depreciation and amortization                                                 | 175 268          |
| Provision for losses on accounts receivable                                   | (19 000)         |
| Increase in accounts receivable                                               | (195 173)        |
| Increase in inventory                                                         | (383 497)        |
| Increase in accounts payable                                                  | 186 540          |
| Increase in accrued expenses                                                  | <u>9 075</u>     |
| Total adjustments                                                             | (226 787)        |
| Net cash used by operating activities                                         | (285 145)        |
| Cash flows from investing activities:                                         |                  |
| Capital expenditures                                                          | (496 965)        |
| Cash flows from financing activities:                                         |                  |
| Advances from parent company                                                  | <u>828 219</u>   |
| Net increase in cash                                                          | 46 109           |
| Cash, at beginning of year                                                    | <u>65 429</u>    |
| Cash, at end of year                                                          | <u>\$111 538</u> |

See accompanying accountants' review  
report and notes to financial statements.

MERCURY AEROSPACE INC.

NOTES TO FINANCIAL STATEMENTS

NOTE 1 - SUMMARY OF ACCOUNTING POLICIES

Business

On July 23, 1987, Blanc-Aero Industries (a French Company) acquired the assets and assumed the liabilities of Microdot Inc.'s Mercury Aerospace Division through a newly formed company, Mercury Aerospace Inc. (a wholly-owned subsidiary of Blanc-Aero Industries). Mercury Aerospace Inc. is in the business of making and selling fasteners to the aircraft industries.

Inventories

Inventories are valued at the lower of cost or market. Cost is determined by the first-in, first-out method.

Property, equipment and depreciation

Property and equipment are stated at cost. Depreciation is computed using the straight-line method over the estimated useful lives of the assets. Amortization of leasehold improvements is computed using the straight-line method over the life of the lease.

Cash flow statement policy

For purposes of the statement of cash flows, the Company considers cash to be only cash on hand and in banks.

NOTE 2 - INVENTORIES

Inventories are summarized as follows:

|                 |                    |
|-----------------|--------------------|
| Raw materials   | \$ 274 778         |
| Work in process | 856 037            |
| Finished goods  | <u>121 000</u>     |
|                 | <u>\$1 251 815</u> |

See accompanying accountants' review report.

MERCURY AEROSPACE INC.

NOTES TO FINANCIAL STATEMENTS  
(Concluded)

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NOTE 3 - PROPERTY AND EQUIPMENT

Major classes of property and equipment consist of the following:

|                                                   |                   | Estimated<br>useful lives |
|---------------------------------------------------|-------------------|---------------------------|
| Machinery and equipment                           | \$ 826 484        | 5 years                   |
| Office equipment                                  | 81 891            | 3-5 years                 |
| Transportation equipment                          | 42 737            | 3 years                   |
| Leasehold improvements                            | <u>76 326</u>     | 3 years                   |
|                                                   | 1 027 438         |                           |
| Less accumulated depreciation<br>and amortization | <u>225 271</u>    |                           |
| Net property and equipment                        | <u>\$ 802 167</u> |                           |

NOTE 4 - RELATED PARTY TRANSACTIONS

The Company has a non-interest bearing note payable to Blanc-Aero Industries which represents advances to the Company amounting to \$1,311,719.

NOTE 5 - INCOME TAXES

At December 31, 1988, the Company has net operating loss carryforwards available to offset future taxable income of approximately \$160,000 which expires in the years 2002 and 2003.

NOTE 6 - COMMITMENTS

The company leases its premises under an operating lease expiring in 1991. Future minimum rental payments are as follows:

|      |                  |
|------|------------------|
| 1989 | \$190 344        |
| 1990 | 190 344          |
| 1991 | <u>190 344</u>   |
|      | <u>\$571 032</u> |

Rent expense for the period amounted to \$190,344.

See accompanying accountants' review report.

SUPPLEMENTAL MATERIAL

Our review of the financial statements in the preceding section of this report was directed to an expression of limited assurances on those statements taken as a whole. The supplemental material presented in the following section is presented only for supplementary purposes and has been subjected to the inquiry and analytical procedures applied in the review of the basic financial statements. Based on our review, we did not become aware of any material modifications that should be made to the supplemental material in order for such information to be in conformity with generally accepted accounting principles when considered in relation to the financial statements taken as a whole.

*BDO Seidman*

Certified Public Accountants

Beverly Hills, California  
January 23, 1989

MERCURY AEROSPACE INC.

SCHEDULES OF COST OF GOODS SOLD  
FOR THE YEAR ENDED DECEMBER 31, 1988

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COST OF GOODS SOLD:

|                         |                    |
|-------------------------|--------------------|
| Inventories - beginning | \$ 868 318         |
| Labor                   | 1 305 014          |
| Purchases               | 478 170            |
| Sub-contractors         | 350 838            |
| Supplies                | 287 980            |
| Insurance               | 195 455            |
| Depreciation            | 145 641            |
| Rent                    | 142 758            |
| Payroll taxes           | 108 292            |
| Utilities               | 54 409             |
| Repairs and maintenance | <u>52 992</u>      |
|                         | 3 989 867          |
| Inventories - ending    | <u>(1 251 815)</u> |
|                         | <u>\$2 738 052</u> |

See accompanying accountants' review  
report and notes to financial statements.

MERCURY AEROSPACE INC.

SCHEDULES OF SELLING, GENERAL AND ADMINISTRATIVE EXPENSES  
FOR THE YEAR ENDED DECEMBER 31, 1988

|                             | <u>Amount</u>    | <u>% of sales</u> |
|-----------------------------|------------------|-------------------|
| SELLING:                    |                  |                   |
| Salaries                    | \$104 489        | 3.2%              |
| Commissions                 | 14 082           | .4                |
| Insurance                   | 11 113           | .3                |
| Payroll taxes               | <u>9 245</u>     | <u>.3</u>         |
|                             | <u>\$138 929</u> | <u>4.2%</u>       |
| GENERAL AND ADMINISTRATIVE: |                  |                   |
| Salaries and wages          | \$184 846        | 5.6%              |
| Office expense              | 59 845           | 1.8               |
| Professional fees           | 50 615           | 1.5               |
| Rent                        | 47 586           | 1.4               |
| Telephone and telex         | 34 225           | 1.0               |
| Insurance                   | 30 186           | .9                |
| Depreciation                | 29 627           | .9                |
| Intercompany expenses       | 28 881           | .8                |
| Utilities                   | 18 136           | .6                |
| License and permits         | 14 930           | .5                |
| Payroll taxes               | 14 527           | .4                |
| Property taxes              | 3 914            | .1                |
| Auto expense                | 3 758            | .1                |
| Postage                     | 2 226            | .1                |
| Dues and subscriptions      | 1 579            | .1                |
| Bad debts                   | (9 868)          | (.3)              |
| Miscellaneous               | <u>10 518</u>    | <u>.3</u>         |
|                             | <u>\$525 531</u> | <u>15.8%</u>      |

See accompanying accountants' review  
report and notes to financial statements.

MERCURY AEROSPACE INC.  
(a wholly-owned subsidiary of Blanc-Aero Industries)

REVIEWED FINANCIAL STATEMENTS  
AND SUPPLEMENTAL MATERIAL

YEAR ENDED DECEMBER 31, 1989

Report on Reviewed Financial Statements

Mercury Aerospace Inc.  
(a wholly-owned subsidiary of Blanc-Aero Industries)  
North Hollywood, California

We have reviewed the accompanying balance sheet of Mercury Aerospace Inc. as of December 31, 1989 and the related statements of net income and retained earnings (deficit) and cash flows for the year then ended, in accordance with standards established by the American Institute of Certified Public Accountants. All information included in these financial statements is the representation of the management of Mercury Aerospace Inc.

A review consists principally of inquiries of company personnel and analytical procedures applied to financial data. It is substantially less in scope than an audit in accordance with generally accepted auditing standards, the objective of which is the expression of an opinion regarding the financial statements taken as a whole. Accordingly, we do not express such an opinion.

Based on our review, we are not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in conformity with generally accepted accounting principles.

*BDO Seidman*

February 5, 1990

MERCURY AEROSPACE INC.

BALANCE SHEET  
DECEMBER 31, 1989

ASSETS

CURRENT ASSETS:

|                                                                        |               |
|------------------------------------------------------------------------|---------------|
| Cash                                                                   | \$ 110 389    |
| Accounts receivable, less allowance<br>of \$11,000 for possible losses | 1 154 447     |
| Inventories (Note 2)                                                   | 1 422 985     |
| Deferred income taxes (Note 5)                                         | <u>71 500</u> |

TOTAL CURRENT ASSETS 2 759 321

PROPERTY AND EQUIPMENT, less \$507,485  
accumulated depreciation (Note 3) 1 047 945

ADVANCES TO RELATED PARTY (Note 4(a)) 161 111

OTHER ASSETS 54 139

\$4 022 516

LIABILITIES AND STOCKHOLDER'S EQUITY

CURRENT LIABILITIES:

|                               |                |
|-------------------------------|----------------|
| Accounts payable              | \$ 511 762     |
| Accrued expenses              | 128 625        |
| Income taxes payable (Note 5) | 86 400         |
| Notes payable                 | <u>250 000</u> |

TOTAL CURRENT LIABILITIES 976 787

ADVANCES FROM PARENT COMPANY (Note 4(b)) 1 661 038

TOTAL LIABILITIES 2 637 825

COMMITMENTS (Note 6)

STOCKHOLDER'S EQUITY:

|                                                                                      |                |
|--------------------------------------------------------------------------------------|----------------|
| Common stock, \$1 par value; 100,000<br>shares authorized; issued and<br>outstanding | 100 000        |
| Paid-in-capital                                                                      | 1 100 000      |
| Retained Earnings                                                                    | <u>184 691</u> |

TOTAL STOCKHOLDER'S EQUITY 1 384 691

\$4 022 516

See accompanying accountants' review  
report and notes to financial statements.

MERCURY AEROSPACE INC.

STATEMENT OF NET INCOME AND RETAINED EARNINGS (DEFICIT)  
FOR THE YEAR ENDED DECEMBER 31, 1989

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|                                                                          | <u>Amount</u>     | <u>% of sales</u> |
|--------------------------------------------------------------------------|-------------------|-------------------|
| NET SALES                                                                | \$5 728 754       | 100.0%            |
| COST OF GOODS SOLD                                                       | <u>4 325 473</u>  | <u>75.5</u>       |
| Gross profit                                                             | 1 403 281         | 24.5              |
| OPERATING EXPENSES:                                                      |                   |                   |
| Selling                                                                  | 219 722           | 3.8               |
| General and administrative                                               | <u>704 853</u>    | <u>12.3</u>       |
|                                                                          | <u>924 575</u>    | <u>16.1</u>       |
| Operating income                                                         | 478 706           | 8.4               |
| TAXES ON INCOME (Note 5)                                                 | <u>195 500</u>    | <u>1.8</u>        |
| Net income before extraordinary item                                     | 283 206           | 6.6%              |
| EXTRAORDINARY ITEM - benefit from use<br>of accounting loss carryforward | <u>62 000</u>     | <u>.6</u>         |
| NET INCOME                                                               | 345 206           | <u>6.0%</u>       |
| DEFICIT, at beginning of year                                            | <u>(160 515)</u>  |                   |
| RETAINED EARNINGS, at end of year                                        | \$ <u>184 691</u> |                   |

See accompanying accountants' review  
report and notes to financial statements.

MERCURY AEROSPACE INC.

STATEMENT OF CASH FLOWS  
FOR THE YEAR ENDED DECEMBER 31, 1989

Increase (decrease) in cash

|                                                                               |                  |
|-------------------------------------------------------------------------------|------------------|
| Cash flows from operating activities:                                         |                  |
| Net income                                                                    | \$345 206        |
| Adjustments to reconcile net income to net cash used by operating activities: |                  |
| Depreciation and amortization                                                 | 287 987          |
| Provision for losses on accounts receivable                                   | 5 000            |
| Loss on sale of assets                                                        | 1 685            |
| Increase from changes in:                                                     |                  |
| Accounts receivable                                                           | (587 116)        |
| Inventory                                                                     | (171 170)        |
| Deferred income taxes                                                         | (71 500)         |
| Other assets                                                                  | (33 526)         |
| Accounts payable                                                              | 167 799          |
| Accrued expenses                                                              | 65 328           |
| Income taxes payable                                                          | <u>86 400</u>    |
| Total adjustments                                                             | <u>(249 113)</u> |
| Net cash provided by operating activities                                     | <u>96 093</u>    |
| Cash flows from investing activities:                                         |                  |
| Capital expenditures                                                          | (540 450)        |
| Advances to related party                                                     | (161 111)        |
| Sale of assets                                                                | <u>5 000</u>     |
| Net cash used in investing activities                                         | <u>(696 561)</u> |
| Cash flows from financing activities:                                         |                  |
| Advances from parent company                                                  | 349 319          |
| Proceeds from note payable                                                    | <u>250 000</u>   |
| Net cash provided by financing activities                                     | <u>599 319</u>   |
| Net decrease in cash                                                          | (1 149)          |
| Cash, at beginning of year                                                    | <u>111 538</u>   |
| Cash, at end of year                                                          | <u>\$110 389</u> |

See accompanying accountants' review  
report and notes to financial statements.

MERCURY AEROSPACE INC.

NOTES TO FINANCIAL STATEMENTS

NOTE 1 - SUMMARY OF ACCOUNTING POLICIES

Business

On July 23, 1987, Blanc-Aero Industries (a French Company) acquired the assets and assumed the liabilities of Microdot Inc.'s Mercury Aerospace Division through a newly formed company, Mercury Aerospace Inc. (a wholly-owned subsidiary of Blanc-Aero Industries). Mercury Aerospace Inc. is in the business of making and selling fasteners to the aircraft industries.

Inventories

Inventories are valued at the lower of cost or market. Cost is determined by the first-in, first-out method.

Property, equipment and depreciation

Property and equipment are stated at cost. Depreciation is computed using the straight-line method over the estimated useful lives of the assets. Amortization of leasehold improvements is computed using the straight-line method over the life of the lease.

Cash flow statement policy

For purposes of the statement of cash flows, the Company considers cash to be only cash on hand and in banks.

NOTE 2 - INVENTORIES

Inventories are summarized as follows:

|                 |                    |
|-----------------|--------------------|
| Raw materials   | \$ 341 778         |
| Work in process | 972 578            |
| Finished goods  | <u>108 629</u>     |
|                 | <u>\$1 422 985</u> |

See accompanying accountants' review report.

MERCURY AEROSPACE INC.

NOTES TO FINANCIAL STATEMENTS  
(Continued)

NOTE 3 - PROPERTY AND EQUIPMENT

Major classes of property and equipment consist of the following:

|                                                   |                    | <u>Estimated<br/>useful lives</u> |
|---------------------------------------------------|--------------------|-----------------------------------|
| Machinery and equipment                           | \$1 292 968        | 5 years                           |
| Office equipment                                  | 102 572            | 3-5 years                         |
| Transportation equipment                          | 31 187             | 3 years                           |
| Leasehold improvements                            | <u>128 703</u>     | 3 years                           |
|                                                   | 1 555 430          |                                   |
| Less accumulated depreciation<br>and amortization | <u>507 485</u>     |                                   |
| Net property and equipment                        | <u>\$1 047 945</u> |                                   |

NOTE 4 - RELATED PARTY TRANSACTIONS

a) The Company has an interest bearing note receivable from an affiliate company of \$161,111 at December 31, 1989 that bears interest at the prime rate.

b) The Company has a non-interest bearing note payable to Blanc-Aero Industries which represents advances to the Company of \$1,661,038.

NOTE 5 - ON TAXES INCOME

Taxes on income are comprised of the following:

|                 |                  |
|-----------------|------------------|
| Current:        |                  |
| Federal         | \$150 000        |
| State           | <u>55 000</u>    |
|                 | 205 000          |
| Deferred        | <u>(9 500)</u>   |
| Taxes on income | <u>\$195 500</u> |

Taxes on income for the year ended December 31, 1989 were reduced by charges in lieu of federal and state income taxes of \$55,000 and \$7,000.

See accompanying accountants' review report.

MERCURY AEROSPACE INC.

NOTES TO FINANCIAL STATEMENTS  
(Concluded)

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NOTE 5 - ON TAXES INCOME (Continued)

The effective tax rate on income before taxes on income was greater than the federal statutory tax rate. The difference results primarily from state income tax.

NOTE 6 - COMMITMENTS

The company leases its premises under an operating lease expiring in 1991. Future minimum rental payments are as follows:

|      |                  |
|------|------------------|
| 1990 | 190 344          |
| 1991 | <u>190 344</u>   |
|      | <u>\$380 688</u> |

Rent expense for the period amounted to \$190,344.

NOTE 7 - SUPPLEMENTAL DISCLOSURES OF CASH FLOW INFORMATION

Cash paid during the year for:

|              |                  |
|--------------|------------------|
| Interest     | \$ <u>3 056</u>  |
| Income taxes | <u>\$118 600</u> |

See accompanying accountants' review report.

### SUPPLEMENTAL MATERIAL

Our review of the financial statements in the preceding section of this report was directed to an expression of limited assurances on those statements taken as a whole. The supplemental material presented in the following section is presented only for supplementary purposes and has been subjected to the inquiry and analytical procedures applied in the review of the basic financial statements. Based on our review, we did not become aware of any material modifications that should be made to the supplemental material in order for such information to be in conformity with generally accepted accounting principles when considered in relation to the financial statements taken as a whole.

*BDO Seidman*

Certified Public Accountants

Beverly Hills, California  
February 5, 1990

MERCURY AEROSPACE INC.

SCHEDULES OF COST OF GOODS SOLD  
FOR THE YEAR ENDED DECEMBER 31, 1989

---

COST OF GOODS SOLD:

|                         |                      |
|-------------------------|----------------------|
| Inventories - beginning | \$1 251 815          |
| Labor                   | 1 822 852            |
| Sub-contractors         | 794 669              |
| Purchases               | 604 782              |
| Supplies                | 323 857              |
| Insurance               | 259 149              |
| Depreciation            | 242 702              |
| Payroll taxes           | 177 554              |
| Rent                    | 142 758              |
| Utilities               | 68 612               |
| Repairs and maintenance | <u>59 708</u>        |
|                         | 5 748 458            |
| Inventories - ending    | ( <u>1 422 985</u> ) |
|                         | <u>\$4 325 473</u>   |

See accompanying accountants' review  
report and notes to financial statements.

MERCURY AEROSPACE INC.

SCHEDULES OF SELLING, GENERAL AND ADMINISTRATIVE EXPENSES  
FOR THE YEAR ENDED DECEMBER 31, 1989

---

|                             | <u>Amount</u>    | <u>% of sales</u> |
|-----------------------------|------------------|-------------------|
| SELLING:                    |                  |                   |
| Salaries                    | \$164 575        | 2.9%              |
| Commissions                 | 24 198           | .4                |
| Insurance                   | 17 139           | .3                |
| Payroll taxes               | <u>13 810</u>    | <u>.2</u>         |
|                             | <u>\$219 722</u> | <u>3.8%</u>       |
| GENERAL AND ADMINISTRATIVE: |                  |                   |
| Salaries and wages          | \$221 425        | 3.9%              |
| Office expense              | 66 009           | 1.2               |
| Professional fees           | 54 900           | 1.0               |
| Rent                        | 47 586           | .8                |
| Depreciation                | 45 285           | .8                |
| License and permits         | 37 297           | .6                |
| Telephone and telex         | 37 275           | .6                |
| Intercompany expenses       | 26 914           | .5                |
| Bad debts                   | 25 551           | .5                |
| Advertising                 | 23 421           | .4                |
| Utilities                   | 22 870           | .4                |
| Hazardous Waste             | 19 434           | .3                |
| Travel and Entertainment    | 18 658           | .3                |
| Insurance                   | 16 652           | .3                |
| Property taxes              | 11 387           | .2                |
| Delivery expense            | 11 266           | .2                |
| Auto expense                | 6 431            | .1                |
| Payroll taxes               | 5 918            | .1                |
| Miscellaneous               | <u>6 574</u>     | <u>.1</u>         |
|                             | <u>\$704 853</u> | <u>12.3%</u>      |

See accompanying accountants' review  
report and notes to financial statements.

MERCURY AEROSPACE INC.

COMPILED FINANCIAL STATEMENTS  
AND SUPPLEMENTAL MATERIAL

THREE AND NINE MONTHS ENDED SEPTEMBER 30, 1990 and 1989



1900 Avenue of the Stars  
11th Floor  
Los Angeles, California 90067-6008  
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Accountants and Consultants

October 26, 1990

Mercury Aerospace Inc.  
(wholly-owned subsidiary of Blanc-Aero Industries)  
North Hollywood, California

We have compiled the accompanying balance sheets of Mercury Aerospace Inc. as of September 30, 1990 and 1989 and the related statements of operations for the three and nine months then ended, and supplemental material on pages 6 to 9 in accordance with standards established by the American Institute of Certified Public Accountants.

A compilation is limited to presenting in the form of financial statements information that is the representation of management. We have not audited or reviewed the accompanying financial statements and, accordingly, do not express an opinion or any other form of assurance on them.

Management has elected to omit substantially all of the disclosures and the statement of cash flows required by generally accepted accounting principles. If the omitted disclosures were included in the financial statements, they might influence the user's conclusions about the company's financial position, results of operations, and changes in financial position. Accordingly, these financial statements are not designed for those who are not informed about such matters.

*BDO Seidman*

## MERCURY AEROSPACE INC.

BALANCE SHEETASSETS

|                                                                                     | <u>September 30,</u> |                    |
|-------------------------------------------------------------------------------------|----------------------|--------------------|
|                                                                                     | <u>1990</u>          | <u>1989</u>        |
| CURRENT ASSETS:                                                                     |                      |                    |
| Cash and cash equivalents                                                           | \$ 637 019           | \$ 66 653          |
| Accounts receivable, less allowance for<br>possible losses of \$11,000 and \$6,000  | 1 747 171            | 1 048 627          |
| Deferred taxes                                                                      | 71 500               | -                  |
| Inventories:                                                                        |                      |                    |
| Raw materials                                                                       | 445 466              | 245 299            |
| Work in process                                                                     | 1 316 184            | 933 854            |
| Finished goods                                                                      | <u>218 015</u>       | <u>106 034</u>     |
|                                                                                     | <u>1 979 665</u>     | <u>1 285 187</u>   |
| TOTAL CURRENT ASSETS                                                                | 4 435 355            | 2 400 467          |
| PROPERTY AND EQUIPMENT, less accumulated<br>depreciation of \$832,733 and \$431,882 | 1 887 910            | 1 016 549          |
| OTHER ASSETS                                                                        | <u>371 971</u>       | <u>15 863</u>      |
|                                                                                     | <u>\$6 695 236</u>   | <u>\$3 432 879</u> |

LIABILITIES AND STOCKHOLDERS' EQUITY

|                                                                                              |                    |                    |
|----------------------------------------------------------------------------------------------|--------------------|--------------------|
| CURRENT LIABILITIES:                                                                         |                    |                    |
| Accounts payable                                                                             | \$ 596 043         | \$ 402 896         |
| Accrued expenses                                                                             | 456 642            | 98 033             |
| Income taxes payable                                                                         | <u>55 968</u>      | <u>48 500</u>      |
| TOTAL CURRENT LIABILITIES                                                                    | 1 108 653          | 549 429            |
| NOTE PAYABLE TO BANK                                                                         | 450 000            | -                  |
| LONG-TERM DEBT, to parent company                                                            | <u>3 441 955</u>   | <u>1 656 727</u>   |
| TOTAL LIABILITIES                                                                            | 5 000 608          | 2 206 156          |
| STOCKHOLDERS' EQUITY:                                                                        |                    |                    |
| Common stock, \$1 par value; authorized<br>100,000 shares; issued and outstanding<br>100,000 | 100 000            | 100 000            |
| Paid in capital                                                                              | 1 100 000          | 1 100 000          |
| Retained earnings                                                                            | <u>494 628</u>     | <u>26 723</u>      |
| TOTAL STOCKHOLDERS' EQUITY                                                                   | <u>1 694 628</u>   | <u>1 226 723</u>   |
|                                                                                              | <u>\$6 695 236</u> | <u>\$3 432 879</u> |

See accompanying accountants' compilation report.

MERCURY AEROSPACE INC.  
STATEMENTS OF OPERATIONS

|                            | <u>----- Nine Months Ended September 30, -----</u> |                   |                   |                   |
|----------------------------|----------------------------------------------------|-------------------|-------------------|-------------------|
|                            | <u>1990</u>                                        |                   | <u>1989</u>       |                   |
|                            | <u>Amount</u>                                      | <u>% of Sales</u> | <u>Amount</u>     | <u>% of Sales</u> |
| NET SALES                  | \$6 030 369                                        | 100.0%            | \$4 118 754       | 100.0%            |
| COST OF GOODS SOLD         | <u>4 618 506</u>                                   | <u>76.6</u>       | <u>3 203 274</u>  | <u>77.8</u>       |
| Gross profit               | 1 411 863                                          | 23.4              | 915 480           | 22.2              |
| OPERATING EXPENSES:        |                                                    |                   |                   |                   |
| Selling                    | 214 200                                            | 3.6               | 158 356           | 3.8               |
| General and administrative | <u>700 157</u>                                     | <u>11.6</u>       | <u>482 639</u>    | <u>11.7</u>       |
|                            | <u>914 357</u>                                     | <u>15.2</u>       | <u>640 995</u>    | <u>15.5</u>       |
| Operating income           | 497 506                                            | 8.2               | 274 485           | 6.7               |
| OTHER INCOME               | <u>5 031</u>                                       | <u>.1</u>         | <u>4 254</u>      | <u>0.1</u>        |
| Income before income taxes | 502 537                                            | 8.3               | 278 739           | 6.8               |
| INCOME TAXES               | <u>192 000</u>                                     | <u>3.2</u>        | <u>91 500</u>     | <u>2.2</u>        |
| NET INCOME                 | <u>\$ 310 537</u>                                  | <u>\$ 5.1%</u>    | <u>\$ 187 239</u> | <u>4.6%</u>       |

See accompanying accountants' compilation report.

MERCURY AEROSPACE INC.  
STATEMENTS OF OPERATIONS

|                            | <u>Three Months Ended September 30,</u> |                   |                  |                   |
|----------------------------|-----------------------------------------|-------------------|------------------|-------------------|
|                            | <u>1990</u>                             |                   | <u>1989</u>      |                   |
|                            | <u>Amount</u>                           | <u>% of Sales</u> | <u>Amount</u>    | <u>% of Sales</u> |
| NET SALES                  | \$2 376 710                             | 100.0%            | \$1 496 745      | 100.0%            |
| COST OF GOODS SOLD         | <u>1 919 936</u>                        | <u>80.8</u>       | <u>1 106 647</u> | <u>73.9</u>       |
| Gross profit               | 456 774                                 | 19.2              | 390 098          | 26.1              |
| OPERATING EXPENSES:        |                                         |                   |                  |                   |
| Selling                    | 78 939                                  | 3.3               | 56 673           | 3.8               |
| General and administrative | <u>243 317</u>                          | <u>10.2</u>       | <u>177 231</u>   | <u>11.8</u>       |
|                            | <u>322 256</u>                          | <u>13.5</u>       | <u>233 904</u>   | <u>15.6</u>       |
| Operating income           | 134 518                                 | 5.7               | 156 194          | 10.5              |
| OTHER INCOME               | <u>2 965</u>                            | <u>.1</u>         | <u>2 274</u>     | <u>0.1</u>        |
| Income before income taxes | 137 483                                 | 5.8               | 158 468          | 10.6              |
| INCOME TAXES               | <u>55 000</u>                           | <u>2.3</u>        | <u>91 500</u>    | <u>6.1</u>        |
| NET INCOME                 | <u>\$ 82 483</u>                        | <u>3.5</u>        | <u>\$ 66 968</u> | <u>4.5%</u>       |

See accompanying accountants' compilation report.

MERCURY AEROSPACE INC.  
SCHEDULE OF COST OF GOODS SOLD

|                         | <u>Nine Months Ended September 30,</u> |                    |
|-------------------------|----------------------------------------|--------------------|
|                         | <u>1990</u>                            | <u>1989</u>        |
| COST OF GOODS SOLD:     |                                        |                    |
| Inventories - beginning | \$1 422 985                            | \$1 251 815        |
| Labor                   | 2 089 344                              | 1 332 595          |
| Sub-contractors         | 1 008 956                              | 582 300            |
| Purchases               | 719 323                                | 398 511            |
| Supplies                | 485 928                                | 284 802            |
| Depreciation            | 267 230                                | 155 641            |
| Insurance               | 179 569                                | 159 548            |
| Payroll taxes           | 166 465                                | 122 728            |
| Rent                    | 123 060                                | 107 069            |
| Repairs and maintenance | 71 509                                 | 43 524             |
| Utilities               | <u>63 802</u>                          | <u>49 928</u>      |
|                         | 6 598 171                              | 4 488 461          |
| Inventories - ending    | <u>1 979 665</u>                       | <u>1 285 187</u>   |
|                         | <u>\$4 618 506</u>                     | <u>\$3 203 274</u> |

See accompanying accountants' compilation report.

MERCURY AEROSPACE INC.

SCHEDULE OF COST OF GOODS SOLD

|                         | <u>Three Months Ended September 30,</u> |                    |
|-------------------------|-----------------------------------------|--------------------|
|                         | <u>1990</u>                             | <u>1989</u>        |
| COST OF GOODS SOLD:     |                                         |                    |
| Inventories - beginning | \$1 857 713                             | \$1 203 853        |
| Labor                   | 827 681                                 | 471 713            |
| Sub-contractors         | 433 833                                 | 218 672            |
| Purchases               | 225 806                                 | 159 734            |
| Supplies                | 197 466                                 | 103 447            |
| Depreciation            | 164 860                                 | 55 019             |
| Payroll taxes           | 80 881                                  | 38 855             |
| Rent                    | 44 867                                  | 35 690             |
| Repairs and maintenance | 33 485                                  | 15 608             |
| Insurance               | 19 499                                  | 71 863             |
| Utilities               | 13 510                                  | 17 380             |
|                         | <u>3 899 601</u>                        | <u>2 391 834</u>   |
| Inventories - ending    | <u>1 979 665</u>                        | <u>1 285 187</u>   |
|                         | <u>\$1 919 936</u>                      | <u>\$1 106 647</u> |

See accompanying accountants' compilation report.

MERCURY AEROSPACE INC.

SCHEDULE OF SELLING EXPENSES AND  
GENERAL AND ADMINISTRATIVE EXPENSES

| <u>-----Nine Months Ended September 30,-----</u> |                  |               |                  |              |
|--------------------------------------------------|------------------|---------------|------------------|--------------|
| <u>1990</u>                                      |                  | <u>1989</u>   |                  |              |
| <u>Amount</u>                                    | <u>% of</u>      | <u>Amount</u> | <u>% of</u>      |              |
|                                                  | <u>Sales</u>     |               | <u>Sales</u>     |              |
| SELLING:                                         |                  |               |                  |              |
| Salaries                                         | \$154 002        | 2.6%          | \$121 551        | 3.0%         |
| Commissions                                      | 32 580           | 0.6           | 15 098           | 0.3          |
| Payroll taxes                                    | 14 210           | 0.2           | 10 477           | 0.2          |
| Insurance                                        | <u>13 408</u>    | <u>0.2</u>    | <u>11 230</u>    | <u>0.3</u>   |
|                                                  | <u>\$214 200</u> | <u>3.6%</u>   | <u>\$158 356</u> | <u>3.8%</u>  |
| GENERAL AND ADMINISTRATIVE:                      |                  |               |                  |              |
| Salaries and wages                               | \$209 415        | 3.5%          | \$152 115        | 3.6          |
| Office expense                                   | 131 590          | 2.2           | 87 859           | 2.1          |
| Depreciation                                     | 58 018           | 0.9           | 51 289           | 1.2          |
| Rent                                             | 44 803           | 0.7           | 35 690           | 0.9          |
| Professional fees                                | 42 822           | 0.7           | 27 022           | 0.7          |
| Insurance                                        | 36 804           | 0.6           | 24 171           | 0.6          |
| Telephone and telex                              | 36 018           | 0.6           | 27 262           | 0.7          |
| Intercompany expenses                            | 28 308           | 0.5           | 14 041           | 0.3          |
| Payroll taxes                                    | 22 330           | 0.4           | 16 463           | 0.4          |
| Utilities                                        | 21 267           | 0.4           | 16 643           | 0.4          |
| Property taxes                                   | 15 188           | 0.3           | 4 887            | 0.1          |
| Auto expense                                     | 8 462            | 0.1           | 4 847            | 0.1          |
| License and permits                              | 7 861            | 0.1           | 2 277            | 0.1          |
| Postage                                          | 4 609            | 0.1           | 2 069            | 0.1          |
| Dues and subscriptions                           | 2 562            | -             | 3 270            | 0.1          |
| Miscellaneous                                    | <u>30 100</u>    | <u>0.5</u>    | <u>12 733</u>    | <u>0.3</u>   |
|                                                  | <u>\$700 157</u> | <u>11.6%</u>  | <u>\$482 639</u> | <u>11.7%</u> |

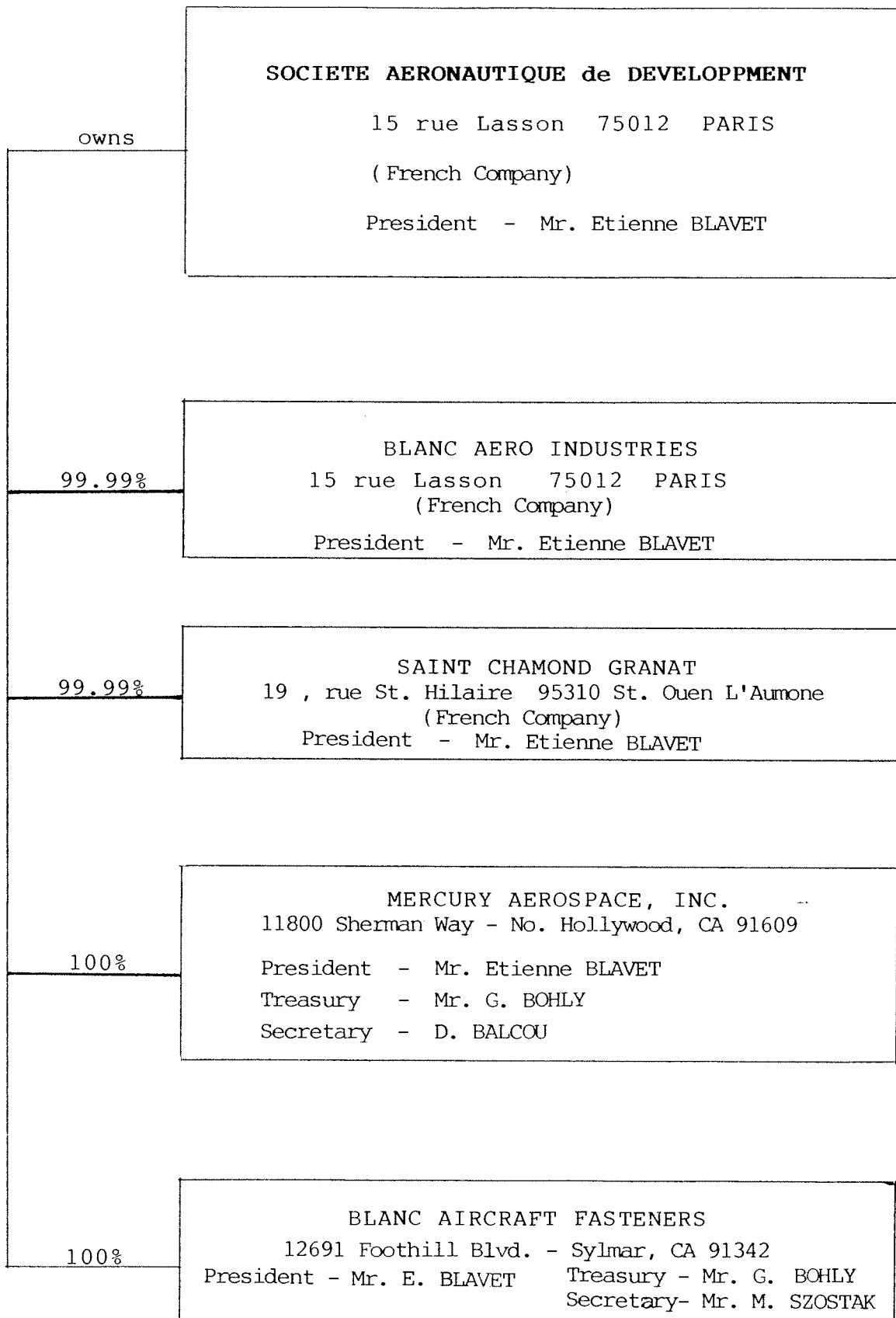
See accompanying accountants' compilation report.

MERCURY AEROSPACE INC.

SCHEDULE OF SELLING EXPENSES AND  
GENERAL AND ADMINISTRATIVE EXPENSES

|                             | <u>Three Months Ended September 30,</u> |                   |                  |                   |
|-----------------------------|-----------------------------------------|-------------------|------------------|-------------------|
|                             | <u>1990</u>                             |                   | <u>1989</u>      |                   |
|                             | <u>Amount</u>                           | <u>% of Sales</u> | <u>Amount</u>    | <u>% of Sales</u> |
| SELLING:                    |                                         |                   |                  |                   |
| Salaries                    | \$ 59 456                               | 2.5%              | \$ 42 229        | 2.8%              |
| Payroll taxes               | 8 084                                   | 0.3               | 3 317            | 0.2               |
| Commissions                 | 6 730                                   | 0.3               | 5 796            | 0.4               |
| Insurance                   | <u>4 669</u>                            | <u>0.2</u>        | <u>5 331</u>     | <u>0.4</u>        |
|                             | <u>\$ 78 939</u>                        | <u>3.3</u>        | <u>\$ 56 673</u> | <u>3.8</u>        |
| GENERAL AND ADMINISTRATIVE: |                                         |                   |                  |                   |
| Salaries and wages          | \$ 62 132                               | 2.6               | \$ 52 132        | 3.5%              |
| Office expense              | 42 608                                  | 1.8               | 36 174           | 2.4%              |
| Depreciation                | 20 844                                  | 0.9               | 20 662           | 1.4               |
| Rent                        | 18 739                                  | 0.8               | 11 896           | 0.8               |
| Telephone and telex         | 17 351                                  | 0.7               | 9 754            | 0.7               |
| Professional fees           | 13 685                                  | 0.5               | 10 630           | 0.7               |
| Insurance                   | 12 770                                  | 0.5               | 10 650           | 0.7               |
| Intercompany expenses       | 11 325                                  | 0.5               | 4 951            | 0.3               |
| Payroll taxes               | 8 598                                   | 0.4               | 5 212            | 0.3               |
| Utilities                   | 8 592                                   | 0.4               | 5 793            | 0.4               |
| Property Taxes              | 5 557                                   | 0.2               | 2 390            | 0.2               |
| Auto expense                | 4 274                                   | 0.2               | 2 167            | 0.1               |
| License and permits         | 3 126                                   | 0.1               | 209              | 0.0               |
| Postage                     | 1 210                                   | 0.1               | 610              | 0.0               |
| Dues and subscriptions      | 251                                     | -                 | 1 074            | 0.1               |
| Miscellaneous               | <u>12 255</u>                           | <u>0.5</u>        | <u>2 927</u>     | <u>0.2</u>        |
|                             | <u>\$243 317</u>                        | <u>10.2%</u>      | <u>\$177 231</u> | <u>11.8%</u>      |

See accompanying accountants' compilation report.



Document ①

CERTIFICATE OF INCORPORATION

OF

MERCURY AEROSPACE INC.

1. The name of the corporation is:

MERCURY AEROSPACE INC.

2. The address of its registered office in the State of Delaware is Corporation Trust Center, 1209 Orange Street, in the City of Wilmington, County of New Castle. The name of its registered agent at such address is The Corporation Trust Company.

3. The nature of the business or purposes to be conducted or promoted is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Delaware.

4. The total number of shares of stock which the corporation shall have authority to issue is One Hundred Thousand (100,000) and the par value of each of such shares is One Dollar (\$1.00) amounting in the aggregate to One Hundred Thousand Dollars (\$100,000.00).

5. The board of directors is authorized to make, alter or repeal the by-laws of the corporation. Election of directors need not be by written ballot.

6. The name and mailing address of the incorporator is:

T. L. Coles  
Corporation Trust Center  
1209 Orange Street  
Wilmington, Delaware 19801

I, THE UNDERSIGNED, being the incorporator hereinbefore named, for the purpose of forming a corporation pursuant to the General Corporation Law of Delaware, do make this certificate, hereby declaring and certifying that this is my act and deed and the facts herein stated are true, and accordingly have hereunto set my hand this 17th day of July, 1987.

T. L. Coles  
T. L. Coles

180360

## State of Delaware



## Office of Secretary of State

I, MICHAEL HARKINS, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF INCORPORATION OF MERCURY AEROSPACE INC. FILED IN THIS OFFICE ON THE SEVENTEENTH DAY OF JULY, A.D. 1987, AT 3:30 O'CLOCK P.M.

| | | | | | | | | |



737198042

A handwritten signature of Michael Harkins in black ink, written over a horizontal line.

Michael Harkins, Secretary of State  
11320986

AUTHENTICATION:

DATE:

07/17/1987

CERTIFICATE OF INCORPORATION

OF

MERCURY AEROSPACE INC.

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MERCURY AEROSPACE INC.

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T. L. Coles  
T. L. Coles

## State of Delaware



## Office of Secretary of State

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737198042

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Michael Harkins, Secretary of State  
11320984

AUTHENTICATION:

DATE:

07/17/1987

Received for Record

July 22nd, A. D. 1987.

William M. Honey, Recorder.

STATE OF DELAWARE :  
: SS.:  
NEW CASTLE COUNTY :

Recorded in the Recorder's Office at  
Wilmington, Vol.                      Page                      &c., the  
22nd day of July, A. D. 1987.

Witness my hand and official seal.

William M. Honey  
Recorder.

\*\*\*\*\*  
"    Records Office            "  
"    New Castle Co. Del.      "  
"    Mercy Justice            "  
\*\*\*\*\*

accordingly have hereunto set my hand this 17th day of July,  
1987.

T. L. Coles

---

T. L. Coles

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Corporation Trust Center  
1209 Orange Street  
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CERTIFICATE OF INCORPORATION

OF

MERCURY AEROSPACE INC.

\* \* \* \* \*

1. The name of the corporation is:

MERCURY AEROSPACE INC.

2. The address of its registered office in the State of Delaware is Corporation Trust Center, 1209 Orange Street, in the City of Wilmington, County of New Castle. The name of its registered agent at such address is The Corporation Trust Company.

3. The nature of the business or purposes to be conducted or promoted is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Delaware.

\* \* \* \* \*

MERCURY AEROSPACE INC.

\* \* \* \* \*

\* \* \* \* \*

C O R P O R A T E   R E C O R D S

\* \* \* \* \*

\* \* \* \* \*

FILED

JUL 17 1987 3:30 PM

*Michael H. Hester*  
SECRETARY OF STATE

## CERTIFICATE OF INCORPORATION

OF

MERCURY AEROSPACE INC.

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T. L. Coles  
T. L. Coles

RECEIVED FOR RECORD

JUL 22 1987

William M. Honey, Recorder

23756

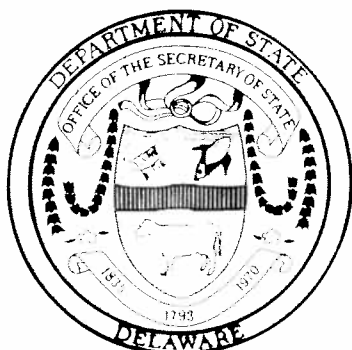
# State of Delaware



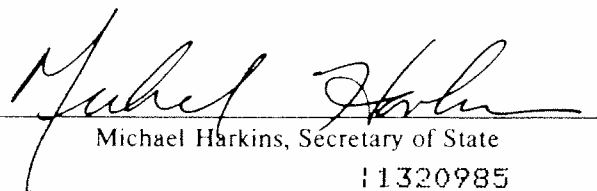
## Office of Secretary of State

I, MICHAEL HARKINS, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF INCORPORATION OF MERCURY AEROSPACE INC. FILED IN THIS OFFICE ON THE SEVENTEENTH DAY OF JULY, A.D. 1987, AT 3:30 O'CLOCK P.M.

1 1 1 1 1 1 1 1 1 1



737198042

  
 Michael Harkins, Secretary of State

11320985

AUTHENTICATION:

DATE:

07/17/1987

# THE CORPORATION TRUST COMPANY



*Associated with CT Corporation System*

CORPORATION TRUST CENTER  
1209 ORANGE STREET  
WILMINGTON, DEL. 19801  
(302) 658-7581

MAILING ADDRESS:  
P.O. BOX 631  
WILMINGTON, DEL. 19899


**SEP 10 1987**

RE: MERCURY AEROSPACE INC.

PATRICIA SOUSLOFF, ATTORNEY  
SHERMAN & STERLING  
725 SOUTH FIGUEROA STREET  
21st FLOOR  
LOS ANGELES, CALIFORNIA 90017

Attached for the permanent records of this corporation,  
is the certified recorded copy of your document, which has  
just been released by the Recorder of Deeds.

THE CORPORATION TRUST COMPANY

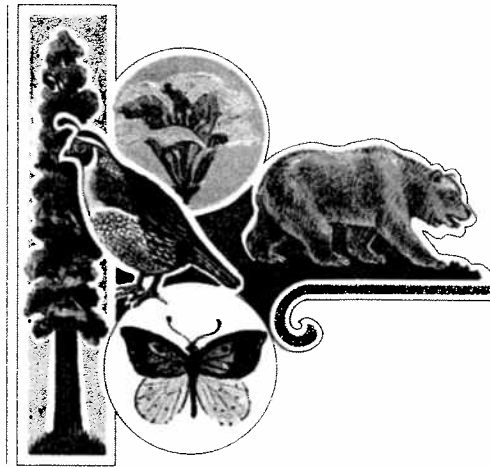
  
George J. Coyle  
Assistant Vice-President

Enclosure

# State of California

OFFICE OF THE SECRETARY OF STATE

C T CORPORATION SYSTEM  
800 S. FIGUEROA ST.  
LOS ANGELES, CA 90017



RESERVATION NUMBER

R0020319

I, MARCH FONG EU, Secretary of State of the State of California, do hereby certify that the name:

MERCURY AEROSPACE

is not one which is likely to mislead the public and is not the same as, and does not resemble, so closely as to tend to deceive the name of a corporation formed under the laws of this State, or the name of corporation not incorporated under the laws of this State which is authorized to transact intrastate business in this State, or a name which is under reservation, as provided in Section 201 of the Corporations Code of this State, and that this name is hereby reserved for a period of sixty days commencing on the date hereof for the use of the addressee as specified on this certificate.



ISSUED: 08/25/87

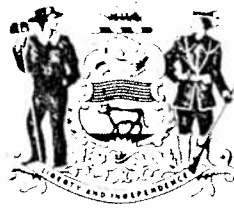
EXPIRES: 10/23/87

*March Fong Eu*

Secretary of State

PEN 361

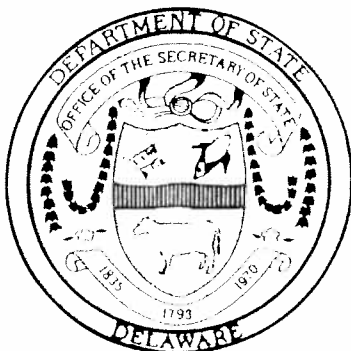
## State of Delaware



## Office of Secretary of State

I, MICHAEL HARKINS, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY MERCURY AEROSPACE INC. IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE DATE SHOWN BELOW.

| | | | | | | | |



737198042

A handwritten signature of Michael Harkins in cursive script, written over a horizontal line.

Michael Harkins, Secretary of State  
11320987

AUTHENTICATION:

DATE:

07/17/1987

1594413

DO NOT WRITE IN THIS SPACE

# Statement and Designation by Foreign Corporation

ENDORSED  
FILEDin the office of the Secretary of State  
of the State of California

AUG 26 1987

MARCH FONG EU, Secretary of State

MERCURY AEROSPACE INC.

(Name of Corporation)

a corporation organized and existing under the laws of DELAWARE

(Place or State of incorporation)

makes the following statements and designation:

1. The address of its principal executive office is 11800 Sherman Way, North Hollywood,  
California 91605

(Insert complete address of principal executive office wherever located - Do not use Post Office Box)

2. The address of its principal office in the State of California is 11800 Sherman Way,  
North Hollywood, California 91605

(Insert complete address of principal office in California - Do not use Post Office Box.)

## DESIGNATION OF AGENT FOR SERVICE OF PROCESS WITHIN THE STATE OF CALIFORNIA

3. *(Use this paragraph if the process agent is a natural person.)*

a natural person residing in the State of California, whose complete ☐ business ☐ residence address is

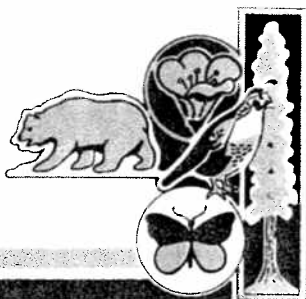
(Do not use Post office box)

is designated as its agent upon whom process directed to the corporation may be served within the State of California in the manner provided by law.

NOTE: Either the business address or the residence address must be given. Indicate which by check mark in proper box.

FORM TO BE COMPLETED ON REVERSE SIDE

C80362



# State of California

OFFICE OF THE SECRETARY OF STATE

## CORPORATION DIVISION

I, *MARCH FONG EU*, Secretary of State of the State of California, hereby certify:

That the annexed transcript has been compared with the corporate record on file in this office, of which it purports to be a copy, and that same is full, true and correct.

IN WITNESS WHEREOF, I execute  
this certificate and affix the Great  
Seal of the State of California this

AUG 28 1987



*March Fong Eu*

Secretary of State

1978 363

# C T CORPORATION SYSTEM



*Associated with The Corporation Trust Company*  
800 SOUTH FIGUEROA STREET, SUITE 1000, LOS ANGELES, CAL. 90017 • (213) 627-8252  
MAILING ADDRESS: P.O. BOX 30309, LOS ANGELES, CAL. 90030-0309

September 8, 1987

RE: MERCURY AEROSPACE INC. (DEL DOM)

Patricia Sousloff, Atty.  
Shearman & Sterling  
725 So. Figueroa St., 21st Flr.  
Los Angeles, CA 90017

Dear Ms. Sousloff:

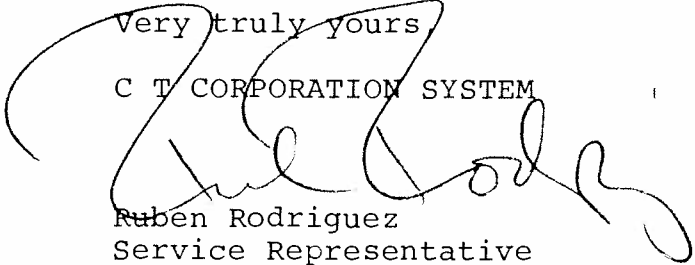
This company was qualified in the State of California on August 26, 1987. Evidence of this filing is attached.

This concludes our services. You will shortly be furnished with an itemized invoice.

If we can be of further assistance, please do not hesitate to call.

Very truly yours,

C T CORPORATION SYSTEM

  
Ruben Rodriguez  
Service Representative

RR/aul  
Encls.

800364

# THE CORPORATION TRUST COMPANY



*Associated with CT Corporation System*  
30 THE GREEN, DOVER, DELAWARE 19901 • (302) 734-7492  
MAILING ADDRESS: P.O. BOX 481, DOVER, DEL. 19903

JUL 20 1987

RE: MERCURY AEROSPACE INC.

Patricia Sousloff, Attorney  
Sherman & Sterling  
725 South Figueroa Street  
21st Floor  
Los Angeles, California 90017

Dear Ms. Sousloff:

Pursuant to instructions received, the Certificate of Incorporation for this corporation was filed in the office of the Secretary of State of Delaware on July 17, 1987 at 3:30 P.M. and a certified copy thereof is being recorded in the office of the Recorder of Deeds of New Castle County, Wilmington, Delaware. This copy will be forwarded to you when released by the Recorder.

The Statement of Sole Incorporator, certifying to the election of directors and authorizing the directors to adopt By-laws, was executed in our office on the same date the Certificate of Incorporation was filed with the Secretary of State. The Certificate of Incorporation and Statement of Sole Incorporator will be typed on minute book paper and forwarded upon completion.

We enclose two certified copies of the Certificate of Incorporation.

Very truly yours,

THE CORPORATION TRUST COMPANY

Terry L. Coles  
Service Division

TLC/rlb  
Enc.  
FEDERAL EXPRESS

000365

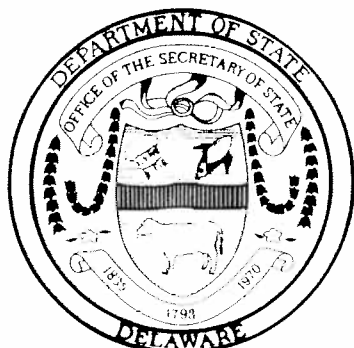
## State of Delaware



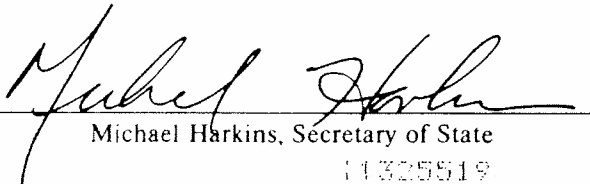
## Office of Secretary of State

I, MICHAEL HARKINS, SECRETARY OF STATE OF THE STATE OF  
 DELAWARE DO HEREBY CERTIFY MERCURY AEROSPACE INC. IS DULY  
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 GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE  
 RECORDS OF THIS OFFICE SHOW, AS OF THE DATE SHOWN BELOW.

1 1 1 1 1 1 1 1 1 1



737202015

  
 Michael Harkins, Secretary of State  
 11325519

AUTHENTICATION:

DATE:

07/21/1987

# THE CORPORATION TRUST COMPANY



*Associated with CT Corporation System*  
30 THE GREEN, DOVER, DELAWARE 19901 • (302) 734-7492  
MAILING ADDRESS: P.O. BOX 481, DOVER, DEL. 19903

July 21, 1987

RE: MERCURY AEROSPACE INC.

Patricia Soufloff  
Shearman & Sterling  
725 South Figieroa Street  
21st Floor  
Los Angeles, California 90017

Dear Ms. Soufloff:

Pursuant to instructions received, we enclose one Certificate(s)  
of Good Standing in regular form, as issued by the Secretary of State  
of Delaware, for the above company(ies).

We appreciate this opportunity to have been of service to you.

Very truly yours,

THE CORPORATION TRUST COMPANY

*Betty Cooper / dal*  
Betty Cooper  
Documents Clerk

BC/syp  
Enc.  
FEDERAL EXPRESS

600366

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BY-LAWS  
OF  
MERCURY AEROSPACE INC.

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BY-LAWS  
OF  
MERCURY AEROSPACE INC.

ARTICLE I

Offices

Section 1.01. Registered Office. The registered office of the Corporation in the State of Delaware shall be established and maintained at the office of The Corporation Trust Company, in the City of Wilmington, County of New Castle, State of Delaware, and said corporation shall be the Registered Agent of the Corporation in charge thereof.

Section 1.02. Other Offices. The Corporation may have other offices, either within or without the State of Delaware, at such place or places as the Board of Directors may from time to time appoint or the business of the Corporation may require.

ARTICLE II

Meetings of Stockholders

Section 2.01. Annual Meetings. Annual meetings of stockholders for the election of directors and for the transaction of any proper business shall be held at such place, either within or without the State of Delaware, and at such time and date as the Board of Directors by resolution

shall determine and as set forth in the notice of the meeting. If the annual meeting of stockholders is not held on the date designated therefor, the Board of Directors shall cause the meeting to be held as soon thereafter as convenient. At each annual meeting the stockholders entitled to vote shall elect a Board of Directors and they may transact such other corporate business as may properly be brought before the meeting.

Section 2.02. Voting. Each stockholder entitled to vote in accordance with the terms of the Certificate of Incorporation and in accordance with the provisions of these By-Laws shall be entitled to one vote, in person or by proxy, for each share of stock outstanding and entitled to vote held by such stockholder, but no proxy shall be voted after three years from its date unless such proxy provides for a longer period. Upon the demand of any stockholder, the vote for directors and the vote upon any question before the meeting shall be by written ballot. When a quorum is present at any meeting, the vote of the holders of a majority of the shares of stock outstanding and having voting power present in person or represented by proxy shall decide any question brought before such meeting, unless the question is one upon which by express provision of a statute or of the Certificate of Incorporation a different vote is required, in which case such express provision shall govern and control the decision of such question.

The officer who has charge of the stock ledger of the Corporation shall prepare and make, at least ten days before every meeting of stockholders, a complete list of the stockholders entitled to vote at the meeting, arranged in alphabetical order, and showing the address of each stockholder and the number of shares registered in the name of each stockholder. Such list shall be open to the examination of any stockholder, for any purpose germane to the meeting, during ordinary business hours, for a period of at least ten days prior to the meeting, either at a place within the city or town where the meeting is to be held, which place shall be specified in the notice of the meeting, or, if not so specified, at the place where the meeting is to be held. The list shall also be produced and kept at the time and place of the meeting during the whole time thereof and may be inspected by any stockholder who is present.

Section 2.03. Quorum. At all meetings of stockholders, except as otherwise required by statute or by the Certificate of Incorporation, the presence, in person or by proxy, of the holders of a majority of the shares of stock outstanding and entitled to vote thereat shall be requisite for and shall constitute a quorum for the transaction of business. In case a quorum shall not be present at any meeting, a majority in interest of the stockholders entitled to vote thereat, present in person or by proxy, shall have

power to adjourn the meeting from time to time, without notice of the adjourned meeting other than an announcement of the time and place thereof at the meeting which shall be so adjourned, until the requisite amount of shares entitled to vote shall be present or represented. At any such adjourned meeting at which the requisite amount of shares entitled to vote shall be present or represented, any business may be transacted which might have been transacted at the meeting as originally notified. If the adjournment is for more than thirty days, or if after the adjournment a new record date is fixed for the adjourned meeting, a notice of the adjourned meeting shall be given to each stockholder of record entitled to vote at the meeting.

Section 2.04. Special Meetings. Special meetings of the stockholders for any purpose or purposes, unless otherwise prescribed by statute or by the Certificate of Incorporation, may be called by the Chairman of the Board, the President or the Secretary and shall be called by the Chairman of the Board, the President or the Secretary at the request of the Board of Directors or at the request in writing of the holders of a majority of the shares of stock outstanding and having voting power. Such request shall state the purpose or purposes of the proposed meeting. Special meetings may be held at such time and place, within or without the State of Delaware, as shall be stated in the notice of the meeting.

Section 2.05. Notice of Meetings. Written notice, stating the place, date and time of any meeting, annual or special, and, if a special meeting, the purpose or purposes for which the meeting is called, shall be given to each stockholder entitled to vote thereat, not less than ten nor more than sixty days before the date of the meeting.

Section 2.06. Action Without Meeting. Unless otherwise provided in the Certificate of Incorporation, any action required to be taken at any annual or special meeting of stockholders, or any action which may be taken at any annual or special meeting of the stockholders, may be taken without a meeting, without prior notice and without a vote, if a consent in writing, setting forth the action so taken, shall be signed by the holders of outstanding stock having not less than the minimum number of votes that would be necessary to authorize or take such action at a meeting at which all shares entitled to vote thereon were present and voted. Prompt notice of the taking of the corporate action without a meeting by less than unanimous written consent shall be given to those stockholders who have not consented in writing.

ARTICLE IIIDirectors

Section 3.01. Number and Term. The number of directors may be fixed from time to time by resolution of the Board of Directors or by action of the stockholders. The directors shall be elected at the annual meeting of the stockholders and each director shall be elected to hold office until his successor shall be elected and qualified. Directors need not be stockholders.

Section 3.02. Resignations. Any director or member of a committee may resign at any time. Such resignation shall be made in writing and shall take effect at the time specified therein or, if no time be specified, at the time of its receipt by the President or the Secretary. The acceptance of a resignation shall not be necessary to make it effective.

Section 3.03. Vacancies. Vacancies and newly created directorships resulting from any increase in the authorized number of directors may be filled by a majority of the directors then in office, though less than a quorum, or by a sole remaining director, and the directors so chosen shall hold office until the next annual election and until their successors shall be elected and qualified.

Unless otherwise provided by the Certificate of Incorporation, when one or more directors shall resign from the Board of Directors, effective at a future date, a majority of the directors then in office, including those who have so resigned, shall have power to fill such vacancy or vacancies, the vote thereon to take effect when such resignation or resignations shall become effective, and each director so chosen shall hold office as herein provided in the filling of other vacancies.

In the event that a vacancy or newly created directorship shall not have been filled by the Board of Directors, the additional director or directors may be elected by the stockholders entitled to vote thereon, either at an annual meeting of stockholders or at a special meeting called for the purpose. The director or directors so chosen shall hold office until the next annual meeting of stockholders and until their successors shall be elected and qualified.

Section 3.04. Removal. Any director or directors may be removed either for or without cause at any time by the affirmative vote of the holders of a majority of all the shares of stock outstanding and entitled to vote, at a special meeting of the holders of such shares, and the vacancies thus created may be filled, at such meeting or at any subsequent meeting, by the affirmative vote of a majority in interest of the stockholders entitled to vote.

Section 3.05. Powers. The business and affairs of the Corporation shall be managed by the Board of Directors, which may exercise all the powers of the Corporation and do all lawful acts and things which are not conferred upon or reserved to the stockholders by law, by the Certificate of Incorporation or by these By-Laws.

Section 3.06. Committees of the Board. The Board of Directors may, by resolution passed by a majority of the whole Board of Directors, designate one or more committees, each committee to consist of two or more of the directors of the Corporation. The Board of Directors may designate one or more directors as alternate members of any committee, who may replace any absent or disqualified member at any meeting of the committee. In the absence or disqualification of a member of a committee, the member or members thereof present at any meeting and not disqualified from voting, whether or not he or they constitute a quorum, may unanimously appoint another member of the Board of Directors to act at the meeting in the place of any such absent or disqualified member. Any such committee, to the extent provided in the resolution of the Board of Directors, shall have and may exercise all the powers and authority of the Board of Directors in the management of the business and affairs of the Corporation, and may authorize the seal of the Corporation to be affixed to all papers which may require it;

but no such committee shall have the power or authority in reference to amending the Certificate of Incorporation, adopting an agreement of merger or consolidation, recommending to the stockholders the sale, lease or exchange of all or substantially all of the Corporation's property and assets, recommending to the stockholders a dissolution of the Corporation or a revocation of a dissolution, or amending the By-Laws of the Corporation; and, unless the resolution or the Certificate of Incorporation expressly so provides, no such committee shall have the power or authority to declare a dividend or to authorize the issuance of stock. Such committee or committees shall have such name or names as may be determined from time to time by resolution adopted by the Board of Directors. Each committee shall keep regular minutes of its meetings and report the same to the Board of Directors when required.

Section 3.07. Meetings. Meetings of the Board of Directors shall be held at such place, either within or without the State of Delaware, as the Board of Directors shall from time to time designate or as may be specified in the notice of such meeting.

Special Meetings of the Board of Directors may be held at any time upon the call of the Chairman of the Board, the President or the Secretary by notice to each director given not less than two days, or not less than three days in

the case of notice given by mail, before such meeting. Special meetings shall be called by the Chairman of the Board, the President or the Secretary in like manner and on like notice on the written request of two directors.

Regular Meetings of the Board of Directors may be held without notice at such time and at such place as shall from time to time be determined by the Board of Directors. The first meeting of a newly elected Board of Directors shall be held without notice as soon as practicable after each annual meeting of the stockholders at the same place at which such meeting was held, provided a quorum is present. If a quorum is not present, such first meeting may be held at such time and at such place as shall be specified in a notice given as herein provided for special meetings of the Board of Directors.

Section 3.08. Quorum. Not less than a majority of the total number of directors shall constitute a quorum for the transaction of business. If at any meeting of the Board of Directors there shall be less than a quorum present, a majority of those present may adjourn the meeting from time to time until a quorum is obtained, and no further notice of the adjourned meeting need be given if the time and place thereof are announced at the meeting which shall be so adjourned. The vote of the majority of the directors present at a meeting at which a quorum is present shall be the act of

the Board of Directors unless a statute or the Certificate of Incorporation shall require a vote of a greater number.

Section 3.09. Compensation. Unless otherwise restricted by the Certificate of Incorporation, the Board of Directors shall have the authority to fix the compensation of directors. The directors may be paid their expenses, if any, of attendance at each meeting of the Board of Directors and may be paid a fixed sum for attendance at each meeting of the Board of Directors or a stated salary as directors. No such payment shall preclude any director from serving the corporation in any other capacity and receiving compensation therefor.

Section 3.10. Action Without Meeting; Presence at Meetings. Unless otherwise restricted by the Certificate of Incorporation, any action required or permitted to be taken at any meeting of the Board of Directors or of any committee thereof may be taken without a meeting if all the members of the Board of Directors or the committee, as the case may be, consent thereto in writing, and the writing or writings are filed with the minutes of proceedings of the Board of Directors or committee.

Unless otherwise restricted by the Certificate of Incorporation, members of the Board of Directors, or any committee designated by such Board, may participate in a meeting of such Board or committee by means of conference

telephone or similar communications equipment by means of which all persons participating in the meeting can hear each other, and such participation in a meeting shall constitute presence in person at such meeting.

#### ARTICLE IV

##### Officers

Section 4.01. Officers. The officers of the Corporation shall be a President, a Secretary and a Treasurer, all of whom shall be elected by the Board of Directors, and who shall hold office until their successors shall be elected and qualified. The Board of Directors also may elect a Chairman of the Board one or more Vice Presidents and one or more Assistant Secretaries and Assistant Treasurers. Two or more offices, except the offices of President and Secretary, may be held by the same person. The officers shall be elected annually by the Board of Directors at its first meeting following the annual meeting of stockholders and shall hold office until their successors are chosen and qualify.

Section 4.02. Other Officers and Agents. The Board of Directors may appoint such other officers and agents as may from time to time appear to be necessary or advisable in the conduct of the affairs of the Corporation, who shall hold

their offices for such terms and shall exercise such powers and perform such duties as shall be determined from time to time by the Board of Directors.

Section 4.03. Resignation; Removal. Any officer may resign at any time. Such resignation shall be made in writing and shall take effect at the time specified therein, and if no time be specified, at the time of its receipt by the Chairman of the Board, the President or the Secretary. The acceptance of a resignation shall not be necessary to make it effective. Any officer may be removed, for or without cause, at any time by the affirmative vote of a majority of the Board of Directors. Any vacancy occurring in any office shall be filled for the unexpired portion of the term by the Board of Directors.

Section 4.04. Chairman of the Board. The Chairman of the Board shall be the chief executive officer of the Corporation and shall have the general and active management of the business of the Corporation and general and active supervision and direction over the other officers, agents and employees and shall see that their duties are properly performed. He shall, if present, preside at each meeting of the stockholders and of the Board and shall be an ex officio member of all committees of the Board. He shall perform all duties incident to the Office of Chairman of the Board and chief executive officer and such other duties as may from time to time be assigned to him by the Board.

Section 4.05. President. The President shall be the chief operating officer of the Corporation and shall have general and active supervision and direction over the business and affairs of the Corporation and over its several officers, subject however, to the direction of the Chairman of the Board and the control of the Board. At the request of the Chairman of the Board, or in the case of his absence or inability to act, the President shall perform the duties of the Chairman of the Board and when so acting shall have all the powers of, and be subject to all the restrictions upon, the Chairman of the Board. He shall perform all duties incident to the office of President and such other duties as from time to time may be assigned to him by the Board, the Chairman of the Board, or these By-Laws.

Section 4.06. Vice Presidents. The Vice Presidents, if any, respectively shall have such powers and perform such duties as may be assigned to them from time to time by the Board of Directors, the Chairman of the Board or the President. In the absence of the Chairman of the Board and the President, or in the event of the inability of the Chairman of the Board and the President to act, the Vice Presidents, if any, in the order of their annual election, shall have authority to exercise the power and perform the duties of the Chairman of the Board and of the President.

Section 4.07. Treasurer. The Treasurer shall have the care and custody of all the funds of the Corporation and shall deposit the same in such banks or other depositories as the Board of Directors, or any officer or officers, or any officer and agent jointly, duly authorized by the Board of Directors, shall, from time to time, direct or approve. He shall disburse the funds of the Corporation under the direction of the Board of Directors, the Chairman of the Board or the President. He shall keep a full and accurate account of all moneys received and paid on account of the Corporation and shall render a statement of his accounts whenever the Board of Directors shall require. He shall perform all other necessary acts and duties in connection with the administration of the financial affairs of the Corporation and shall generally perform all the duties usually appertaining to the office of treasurer of a corporation. When required by the Board of Directors, he shall give bonds for the faithful discharge of his duties in such sums and with such sureties as the Board of Directors shall approve.

Section 4.08. Secretary. The Secretary shall attend all meetings of the Board of Directors and the stockholders and shall record all votes and the minutes of all proceedings in a book to be kept for that purpose and

shall, when requested, perform like duties for all committees of the Board of Directors. He shall attend to the giving of notice of all meetings of the stockholders and, if notice is required, of meetings of the Board of Directors and of committees thereof; he shall have custody of the corporate seal and, when authorized by the Board of Directors, shall have authority to affix the same to any instrument and, when so affixed, it shall be attested by his signature or by the signature of the Treasurer or an Assistant Secretary or an Assistant Treasurer. He shall keep and account for all books, documents, papers and records of the Corporation, except those for which some other officer or agent is properly accountable. He shall generally perform all the duties appertaining to the office of secretary of a corporation. In the absence of the Secretary, such person as shall be designated by the President shall perform his duties.

Section 4.09. Assistant Secretaries. Each Assistant Secretary, if any, shall perform such duties and have such powers as may, from time to time, be assigned to him by the Board of Directors. In the absence or disability of the Secretary, his duties shall be performed and his powers may be exercised by the Assistant Secretary or the Assistant Secretaries, if any, in the order determined by the Board of Directors or, failing such designation, in the order of their last election to that office.

Section 4.10. Assistant Treasurers. Each Assistant Treasurer, if any, shall perform such duties and have such powers as may, from time to time, be assigned to him by the Board of Directors. In the absence or disability of the Treasurer, his duties shall be performed and his powers may be exercised by the Assistant Treasurer or the Assistant Treasurers, if any, in the order determined by the Board of Directors or, failing such designation, in the order of their last election to that office.

Section 4.11. Compensation. The Board of Directors shall have the power to fix the compensation of all officers of the Corporation.

## ARTICLE V

### Miscellaneous

Section 5.01. Certificates of Stock. The shares of stock of the Corporation shall be represented by certificates in such form as shall be determined by the Board of Directors and shall be signed by the Chairman of the Board or the President or a Vice President and the Secretary or an Assistant Secretary or the Treasurer or an Assistant Treasurer, and shall be sealed with the seal of the Corporation or a facsimile thereof. The signatures of the officers upon a certificate may be facsimiles if the certificate is countersigned by a Transfer Agent or registered by a Registrar other than the Corporation

or its employee. In case any officer who has signed or whose facsimile signature has been placed upon a certificate shall have ceased to be such officer before such certificate is issued, it may be issued by the Corporation with the same effect as if he were such officer at the date of issue.

Section 5.02. Transfer Agents and Registrars. The Board of Directors may, in its discretion, appoint one or more banks or trust companies in such city or cities as the Board of Directors may deem advisable, from time to time, to act as Transfer Agents and Registrars of the shares of stock of the Corporation, and, upon such appointments being made, no certificate representing shares shall be valid until countersigned by one of such Transfer Agents and registered by one of such Registrars.

Section 5.03. Lost Certificates. In case any certificate representing shares shall be lost, stolen or destroyed, the Board of Directors, or any officer or officers authorized by the Board of Directors, may authorize the issuance of a substitute certificate in place of the certificate so lost, stolen or destroyed, and, if the Corporation shall have a Transfer Agent and Registrar, may cause or authorize such substitute certificate to be countersigned by the appropriate Transfer Agent and registered by the appropriate Registrar. In each such case, the applicant for a substitute certificate shall furnish to

the Corporation, and to such of its Transfer Agents and Registrars as may require the same, evidence to their satisfaction, in their discretion, of the loss, theft or destruction of such certificate and of the ownership thereof, and also such security or indemnity as may by them be required.

Section 5.04. Transfer of Shares. Transfers of shares shall be made on the books of the Corporation only by the person named in the certificate or by his attorney lawfully constituted in writing, and upon surrender and cancellation of a certificate or certificates of a like number of shares, with duly executed assignment and power of transfer endorsed thereon or attached thereto, and with such proof of the authenticity of the signatures as the Corporation or its agents may reasonably require.

Section 5.05. Stockholders Record Date. In order that the Corporation may determine the stockholders entitled to notice of or to vote at any meeting of stockholders or any adjournment thereof, or to express consent to corporate action in writing without a meeting, or entitled to receive payment of any dividend or other distribution or allotment of any rights, or entitled to exercise any rights in respect of any change, conversion or exchange of stock or for the purpose of any other lawful action, the Board of Directors may fix, in advance, a record date, which shall not be more

than sixty nor less than ten days before the date of such meeting, nor more than sixty days prior to any other action. A determination of stockholders of record entitled to notice of or to vote at a meeting of stockholders shall apply to any adjournment of the meeting; provided, however, that the Board of Directors may fix a new record date for the adjourned meeting.

Section 5.06. Dividends. Subject to the provisions of the Certificate of Incorporation, the Board of Directors may, out of funds legally available therefor, at any regular or special meeting declare dividends upon the capital stock of the Corporation as and when they deem expedient. Before declaring any dividend there may be set apart, out of any funds of the Corporation available for dividends, such sum or sums as the directors, from time to time, in their discretion deem proper for working capital or as a reserve fund to meet contingencies or for equalizing dividends or for such other purposes as the directors shall deem conducive to the interests of the Corporation, and in its discretion the Board of Directors may decrease or abolish any such reserve.

Section 5.07. Registered Stockholders. The Corporation shall be entitled to recognize the exclusive right of a person registered on its books as the owner of shares to receive dividends and other distributions, and to vote as such owner, and to hold liable for calls and

assessments the person registered on its books as the owner of shares, and shall not be bound to recognize any equitable or other claim to or interest in such shares on the part of any other person, whether or not it shall have express or other notice thereof, except as otherwise provided by law.

Section 5.08. Seal. The corporate seal shall be circular in form and shall contain the name of the Corporation, the year of its organization and the words "CORPORATE SEAL, DELAWARE." The seal may be used by causing it or a facsimile thereof to be impressed or affixed or reproduced or otherwise.

Section 5.09. Fiscal Year. The fiscal year of the Corporation shall be determined by the Board of Directors.

Section 5.10. Checks. All checks, drafts or other orders for the payment of money, notes or other evidences of indebtedness issued in the name of the Corporation shall be signed by such officer or officers, agent or agents of the Corporation and in such manner as shall be determined, from time to time, by resolution of the Board of Directors.

Section 5.11. Execution of Proxies. The Chairman of the Board or the President, or, in the absence or disability of the Chairman of the Board and the President, a Vice President, may authorize, from time to time, the signature and issuance of proxies to vote upon shares of stock of other corporations standing in the name of the Corporation or authorize the execution of

consents to action taken or to be taken by such other corporation. All such proxies and consents shall be signed in the name of the Corporation by the Chairman of the Board or the President or a Vice President and by the Secretary or an Assistant Secretary.

Section 5.12. Notice and Waiver of Notice.

Whenever any notice is required to be given under the provisions of any law, of the Certificate of Incorporation or of these By-Laws, personal notice is not meant unless expressly so stated, and any notice so required shall be deemed to be sufficient if given by depositing the same in the United States mail, postage prepaid, addressed to the person entitled thereto at his address as it appears on the records of the Corporation, and such notice shall be deemed to have been given on the day of such mailing. Notice to directors may also be given by telex, cable or telegram. Stockholders not entitled to vote shall not be entitled to receive notice of any meetings except as otherwise provided by statute.

Whenever any notice whatever is required to be given under the provisions of any law or of the Certificate of Incorporation or of these By-Laws, a waiver thereof in writing, signed by the person or persons entitled to said notice, whether before or after the time stated therein, shall be deemed equivalent thereto. Neither the business to

be transacted at, nor the purpose of, any regular or special meeting of the stockholders, directors or members of a committee of directors need be specified in any written waiver of notice unless so required by the Certificate of Incorporation. Attendance of a person at a meeting shall constitute a waiver of notice of such meeting, except when the person attends a meeting for the express purpose of objecting, at the beginning of the meeting, to the transaction of any business because the meeting is not lawfully called or convened.

#### ARTICLE VI

#### Amendments

These By-Laws may be altered, amended or repealed, and new By-Laws may be adopted, by the stockholders or, when such power is conferred upon the Board of Directors by the Certificate of Incorporation, by the Board of Directors, at any regular meeting of the stockholders or of the Board of Directors or at any special meeting of the stockholders or of the Board of Directors if notice of the proposed alteration, amendment, repeal or adoption be contained in the notice of such special meeting.

